

SEARCH REQUEST FORM

58432

Requestor's
Name:

Natalie Davis

Serial

Number: 09/867039

Date:

1-16-02

Phone:

308-6410

Art Unit:

1642

Mailbox 8E12

Search Topic:

Please write a detailed statement of search topic. Describe specifically as possible the subject matter to be searched. Define any terms that may have a special meaning. Give examples or relevant citations, authors keywords, etc., if known. For sequences, please attach a copy of the sequence. You may include a copy of the broadest and/or most relevant claim(s).

Please search for a method of diagnosing, imaging, staging, monitoring and treating colon cancer & metastases thereof ~~with~~ by measuring and using CSG (colon specific genes),

Point of Contact:
Beverly Shears
Technical Info. Specialist
CM1 12C14 Tel: 308-4994
1E05

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Date completed: 01-18-02

Searcher: Beverly 4994

Terminal time: 15

Elapsed time:

CPU time:

Total time: 27

Number of Searches:

Number of Databases: 1

Search Site

☒ STIC☐ CM-1☐ Pre-S

Type of Search

☐ N.A. Sequence☐ A.A. Sequence☐ Structure☐ Bibliographic

Vendors

☐ IG Suite☒ STN☐ Dialog☐ APS☐ Geninfo☐ SDC☐ DARC/Questel☐ Other

09/867034

(FILE CAPLUS ENTERED AT 10:04:19 ON 18 JAN 2002)

L1 112953 SEA FILE=CAPLUS ABB=ON PLU=ON ((COLON OR COLONIC) (S) (CA
NCER? OR CARCIN? OR TUMOUR OR TUMOR OR NEOPLAS?)) OR
METAST?

L2 20 SEA FILE=CAPLUS ABB=ON PLU=ON L1 AND (CSG OR COLON
SPECIF? GENE)

L2 ANSWER 1 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 2002:10740 CAPLUS

TITLE: Use of **colon specific**
gene polypeptides in diagnosing,
monitoring, staging, imaging and treating
colon cancer

INVENTOR(S): Macina, Roberto A.; Pillai, Rajeswari

PATENT ASSIGNEE(S): Diadexus, Inc., USA

SOURCE: PCT Int. Appl., 135 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2002000939	A2	20020103	WO 2001-US20724	20010628
<p>W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM</p> <p>RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG</p>				

PRIORITY APPLN. INFO.: US 2000-214515 P 20000628

AB The invention relates to **colon specific**
gene (CSG) polypeptides, polynucleotides encoding
the polypeptides, methods for producing the polypeptides, in
particular by expressing the polynucleotides, and agonists and
antagonists of the polypeptides. The present invention includes
methods of diagnosing **metastases** or staging of
colon cancer in a patient by comparing **CSG**
expression levels in cells, tissues and body fluids of **colon**
cancer patients and normal human control. Increased
expression of **CSG** indicates progressive cancer while
decreased **CSG** expression is correlated with cancer that is
regressing or in remission. The invention further relates to
methods for utilizing such polynucleotides, polypeptides, agonists
and antagonists for applications, which relate, in part, to
research, diagnostic and clin. arts. Antibodies to **CSG**
polypeptides can be labeled for detection in tissues which would be
useful in detecting **colon cancer** via imaging and
therapy. Vaccines contg. **CSG** proteins are another
embodiment of the invention.

L2 ANSWER 2 OF 20 CAPLUS COPYRIGHT 2002 ACS

09/867034

ACCESSION NUMBER: 2001:886514 CAPLUS
DOCUMENT NUMBER: 136:34276
TITLE: Method of diagnosing, monitoring, staging,
imaging and treating **colon**
cancer
INVENTOR(S): Macina, Roberto A.; Chen, Sei-yu; Pluta, Jason;
Sun, Yongming; Recipon, Herve
PATENT ASSIGNEE(S): Diadexus, Inc., USA
SOURCE: PCT Int. Appl., 116 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001092528	A2	20011206	WO 2001-US17583	20010529
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG			

PRIORITY APPLN. INFO.: US 2000-207383 P 20000526

AB The invention relates to **CSG (colon-specific genes)** polypeptides, polynucleotides encoding the polypeptides, methods for producing the polypeptides, in particular by expressing the polynucleotides, and agonists and antagonists of the polypeptides. The invention further relates to methods for utilizing such polynucleotides, polypeptides, agonists and antagonists for applications, which relate, in part, to research, diagnostic and clin. arts.

L2 ANSWER 3 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 2001:730999 CAPLUS
DOCUMENT NUMBER: 135:284064
TITLE: **Colon cancer**-associated cDNA
sequences and methods for diagnosing,
monitoring, staging, imaging and treating
colon cancers
INVENTOR(S): Yang, Fei; Piderit, Alejandra; Hu, Ping;
Recipon, Herve; Macina, Roberto A.
PATENT ASSIGNEE(S): Diadexus, Inc., USA
SOURCE: PCT Int. Appl., 105 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
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Searcher : Shears 308-4994

09/867034

WO 2001073030 A2 20011004 WO 2001-US9737 20010326

W: AU, CA, JP, US

RW: AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC,
NL, PT, SE, TR

PRIORITY APPLN. INFO.: US 2000-192667 P 20000328

AB The present invention provides fifty seven cDNA fragment sequence which are diagnostic markers for **colon cancer**. In addn., antibodies immunospecific for these markers are provided. Vectors, hosts cells and methods for producing these markers, as well as methods and tools for using these markers in detecting, diagnosing, monitoring, staging, prognosticating, imaging and treating **colon cancer** are also provided.

L2 ANSWER 4 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 2001:534845 CAPLUS

TITLE: hTERT expression and cellular immunity in gastric cancer and precancerosis

AUTHOR(S): Yao, Xixian; Yin, Lei; Zhang, Jieying; Bai, Wenyuan; Li, Yingmin; Sun, Zhongcheng

CORPORATE SOURCE: The Department of Digestive Medicine, the 2nd Hospital, Hebei Medical University, Shijiazhuang, 050000, Peop. Rep. China

SOURCE: Shijie Huaren Xiaohua Zazhi (2001), 9(5), 508-512

CODEN: SHXZF2

PUBLISHER: Shijie Weichangbingxue Zazhishe

DOCUMENT TYPE: Journal

LANGUAGE: Chinese

AB The expression of human telomerase reverse transcriptase in gastric carcinomas and precancerous lesions were studied for evaluating the immune state of such patients and the clin. implications of hTERT and immune state for the diagnosis, treatment and prognosis of gastric cancer. In situ hybridization was used to detect the expression of hTERT mRNA in 116 endoscopic biopsies of gastric mucosa. Tissue samples were analyzed as follows: 30 cases of chronic superficial gastritis (CSG), 44 of precancerous lesions (including 27 of chronic atrophy gastritis, 8 of hyperplastic ploy and 9 of gastric ulcer) and 42 of gastric cancer (GC). At mean time, the T lymphocyte subsets (CD3+, CD4+/CD8+) and natural killer cell (NK) in peripheral blood were detd. by flow cytometrical anal. (FCM) in 30 cases of CSG, 27 of precancerosis (chronic atrophy gastritis, CAG), 42 of GC and the data were compared with those of normal controls (NC). The pos. rate of hTERT varied as follows: 0% (0/30) in CSG, 36% (16/44) in precancerous lesions and 86% (36/42) in GC. The expression of hTERT mRNA was not assocd. with patients gender, tumor location, macroscopic type, lymph node **metastasis** and degree of differentiation. The CD3+ and CD4+ of CSG were lower than that of NC (P < 0.05). Meanwhile, the T lymphocyte subsets (CD3+, CD4+, CD4+/CD8+ ratio) were remarkably lower than that of NC and CSG. Furthermore with the tumor progression, the function of T cells was weakened gradually. The expression of telomerase may be a crucial step in gastric carcinogenesis and increased hTERT mRNA may serve as a novel marker for diagnosis of gastric cancer. The immune state of patients with gastric cancer and precancerosis was somewhat depressed, which indicates the importance of cellular immunity in cancer patients.

09/867034

L2 ANSWER 5 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 2001:475327 CAPLUS

DOCUMENT NUMBER: 135:207449

TITLE: Nucleic acid-based ribozyme and DNazyme
modulators of gene expression

INVENTOR(S): McSwiggen, James; Usman, Nassim; Blatt,
Lawrence; Beigelman, Leonid; Burgin, Alex;
Karpeisky, Alexander; Matulic-Adamic, Jasenka;
Sweedler, David; Draper, Kenneth; Chowrira,
Bharat; Stinchcomb, Dan; Beaudry, Amber; Zinnen,
Shawn; Lugwig, Janos; Sproat, Brian S.

PATENT ASSIGNEE(S): Ribozyme Pharmaceuticals, Inc., USA

SOURCE: PCT Int. Appl., 717 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001016312 A2		20010308	WO 2000-US23998	20000830
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ			
RW:	AT, BE, BF, BJ, CF, CG, CH, CI, CM, CY, DE, DK, ES, FI, FR, GA, GB, GR, IE, IT, LU, MC, ML, MR, NE, NL, PT, SE, SN, TD, TG			
PRIORITY APPLN. INFO.:			US 1999-PV151713	19990831
			US 1999-406643	19990927
			US 1999-PV156467	19990927
			US 1999-PV156236	19990927
			US 1999-436430	19991108
			US 1999-PV169100	19991206
			US 1999-PV173612	19991229
			US 1999-474432	19991229
			US 1999-476387	19991230
			US 2000-498824	20000204
			US 2000-531025	20000320
			US 2000-PV197769	20000414
			US 2000-578223	20000523

AB Novel nucleic acid mols. useful as inhibitors of gene expression, compns., and methods for their use are provided. The invention features novel nucleic acid-based techniques (e.g., enzymic nucleic acid mols. (ribozymes), antisense nucleic acids, 2-5A antisense chimeras, triplex DNA, and antisense nucleic acids contg. RNA-cleaving chem. groups) and their use to modulate the expression of mol. targets impacting the development and progression of cancers, diabetes, obesity, Alzheimer's disease diseases, age-related diseases, and/or hepatitis B infections and related conditions. Catalytic nucleic acids were designed for site-specific cleavage of human mRNA targets encoding protein tyrosine phosphatase 1b, methionine aminopeptidase, .beta.-secretase, presenilin-1, epidermal growth factor receptor-2 (HER2/c-erb2/neu), phospholamban, telomerase, and hepatitis B virus genes. Methods for chem. synthesis of modified nucleoside triphosphates (NTPs) and RNA polymerase-catalyzed incorporation of modified NTPs into catalytic oligonucleotides are also provided. [This abstr. record os one of 6 records for this document necessitated by the large no. of index

09/867034

entries required to fully index the document and publication system constraints.]

L2 ANSWER 6 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 2001:416790 CAPLUS

DOCUMENT NUMBER: 135:30984

TITLE: Cancer-specific gene products for diagnosing, monitoring, staging, imaging and treating prostate cancer

INVENTOR(S): Ali, Shujath; Cafferkey, Robert; Recipon, Herve; Sun, Yongming

PATENT ASSIGNEE(S): Diadexus, Inc., USA

SOURCE: PCT Int. Appl., 52 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001039798	A1	20010607	WO 2000-US32927	20001205
W: CA, JP				
RW: AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR				

PRIORITY APPLN. INFO.: US 1999-169083 P 19991206

AB The present invention provides new markers and methods for detecting, diagnosing, monitoring, staging, prognosticating, imaging and treating prostate cancer. The markers are cancer-specific gene products.

REFERENCE COUNT: 6

REFERENCE(S): (1) Adams, M; Nature 1995, V377, P3 CAPLUS
(2) Bussemakers, M; European Urology 1999, V35(5-6), P408 CAPLUS
(3) Hoon; Journal of Immunology 1995, V154, P730 CAPLUS
(4) Human Genome Sci Inc; WO 9639435 A1 1996 CAPLUS
(5) Raming; Receptors and Channels 1998, V6(2), P141 CAPLUS

ALL CITATIONS AVAILABLE IN THE RE FORMAT

L2 ANSWER 7 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 2001:400023 CAPLUS

Correction of: 2001:294219

DOCUMENT NUMBER: 135:16022

Correction of: 134:337614

TITLE: Nucleic acid-based ribozyme and DNazyme modulators of gene expression

INVENTOR(S): McSwiggen, James; Usman, Nassim; Blatt, Lawrence; Beigelman, Leonid; Burgin, Alex; Karpeisky, Alexander; Matulic-adamic, Jasenka; Sweedler, David; Draper, Kenneth; Chowrira, Bharat; Stinchcomb, Dan; Beaudry, Amber; Zinnen, Shawn; Lugwig, Janos; Sproat, Brian S.

PATENT ASSIGNEE(S): Ribozyme Pharmaceuticals, Inc., USA

SOURCE: PCT Int. Appl., 717 pp.

CODEN: PIXXD2

Searcher : Shears 308-4994

09/867034

DOCUMENT TYPE: Patent
LANGUAGE: English
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001016312	A2	20010308	WO 2000-US23998	20000830
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ			
RW:	AT, BE, BF, BJ, CF, CG, CH, CI, CM, CY, DE, DK, ES, FI, FR, GA, GB, GR, IE, IT, LU, MC, ML, MR, NE, NL, PT, SE, SN, TD, TG			
PRIORITY APPLN. INFO.:			US 1999-PV151713	19990831
			US 1999-406643	19990927
			US 1999-PV156467	19990927
			US 1999-PV156236	19990927
			US 1999-436430	19991108
			US 1999-PV169100	19991206
			US 1999-PV173612	19991229
			US 1999-474432	19991229
			US 1999-476387	19991230
			US 2000-498824	20000204
			US 2000-531025	20000320
			US 2000-PV197769	20000414
			US 2000-578223	20000523

AB Novel nucleic acid mols. useful as inhibitors of gene expression, compns., and methods for their use are provided. The invention features novel nucleic acid-based techniques (e.g., enzymic nucleic acid mols. (ribozymes), antisense nucleic acids, 2-5A antisense chimeras, triplex DNA, and antisense nucleic acids contg. RNA-cleaving chem. groups) and their use to modulate the expression of mol. targets impacting the development and progression of cancers, diabetes, obesity, Alzheimer's disease diseases, age-related diseases, and/or hepatitis B infections and related conditions. Catalytic nucleic acids were designed for site-specific cleavage of human mRNA targets encoding protein tyrosine phosphatase 1b, methionine aminopeptidase, .beta.-secretase, presenilin-1, epidermal growth factor receptor-2 (HER2/c-erb2/neu), phospholamban, telomerase, and hepatitis B virus genes. Methods for chem. synthesis of modified nucleoside triphosphates (NTPs) and RNA polymerase-catalyzed incorporation of modified NTPs into catalytic oligonucleotides are also provided. [This abstr. record os one of 6 records for this document necessitated by the large no. of index entries required to fully index the document and publication system constraints.]

L2 ANSWER 8 OF 20 CAPLUS COPYRIGHT 2002 ACS
ACCESSION NUMBER: 2001:294219 CAPLUS
Correction of: 2001:168136
DOCUMENT NUMBER: 134:337614
Correction of: 134:233606
TITLE: Nucleic acid-based ribozyme and DNazyme modulators of gene expression
INVENTOR(S): McSwiggen, James; Usman, Nassim; Blatt, Lawrence; Beigelman, Leonid; Burgin, Alex; Karpeisky, Alexander; Matulic-adamic, Jasenka; Sweedler, David; Draper, Kenneth; Chowrira,

Searcher : Shears 308-4994

09/867034

PATENT ASSIGNEE(S): Bharat; Stinchcomb, Dan; Beaudry, Amber; Zinnen,
SOURCE: Shawn; Lugwig, Janos; Sproat, Brian S.
Ribozyme Pharmaceuticals, Inc., USA
PCT Int. Appl., 717 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001016312 A2		20010308	WO 2000-US23998	20000830
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ			
RW:	AT, BE, BF, BJ, CF, CG, CH, CI, CM, CY, DE, DK, ES, FI, FR, GA, GB, GR, IE, IT, LU, MC, ML, MR, NE, NL, PT, SE, SN, TD, TG			
PRIORITY APPLN. INFO.:			US 1999-PV151713	19990831
			US 1999-406643	19990927
			US 1999-PV156467	19990927
			US 1999-PV156236	19990927
			US 1999-436430	19991108
			US 1999-PV169100	19991206
			US 1999-PV173612	19991229
			US 1999-474432	19991229
			US 1999-476387	19991230
			US 2000-498824	20000204
			US 2000-531025	20000320
			US 2000-PV197769	20000414
			US 2000-578223	20000523
AB	Novel nucleic acid mols. useful as inhibitors of gene expression, compns., and methods for their use are provided. The invention features novel nucleic acid-based techniques (e.g., enzymic nucleic acid mols. (ribozymes), antisense nucleic acids, 2-5A antisense chimeras, triplex DNA, and antisense nucleic acids contg. RNA-cleaving chem. groups) and their use to modulate the expression of mol. targets impacting the development and progression of cancers, diabetes, obesity, Alzheimer's disease diseases, age-related diseases, and/or hepatitis B infections and related conditions. Catalytic nucleic acids were designed for site-specific cleavage of human mRNA targets encoding protein tyrosine phosphatase 1b, methionine aminopeptidase, .beta.-secretase, presenilin-1, epidermal growth factor receptor-2 (HER2/c-erb2/neu), phospholamban, telomerase, and hepatitis B virus genes. Methods for chem. synthesis of modified nucleoside triphosphates (NTPs) and RNA polymerase-catalyzed incorporation of modified NTPs into catalytic oligonucleotides are also provided. [This abstr. record os one of 6 records for this document necessitated by the large no. of index entries required to fully index the document and publication system constraints.].			
L2	ANSWER 9 OF 20 CAPLUS COPYRIGHT 2002 ACS			
ACCESSION NUMBER:	2001:247142 CAPLUS			
DOCUMENT NUMBER:	134:306971			
TITLE:	Colon and colon cancer associated cDNAs and proteins and their use in diagnosis and treatment of colon cancer			

09/867034

INVENTOR(S): Ruben, Steven M.; Barash, Steven C.; Birse,
Charles E.; Rosen, Craig A.
PATENT ASSIGNEE(S): Human Genome Sciences, Inc., USA
SOURCE: PCT Int. Appl., 9787 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001022920	A2	20010405	WO 2000-US26524	20000928
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG				
AU 2000077215	A5	20010430	AU 2000-77215	20000928
PRIORITY APPLN. INFO.:			US 1999-157137	P 19990929
			US 1999-163280	P 19991103
			WO 2000-US26524	W 20000928

AB This invention relates to newly identified colon or colon cancer related polynucleotides and the polypeptides encoded by these polynucleotides herein collectively known as <colon cancer antigens>s, and the use of such colon cancer antigens for targeting specific cell types and/or diagnosing, detecting, preventing and treating disorders of the colon, particularly the presence of colon cancer and colon cancer metastases. This invention relates to colon cancer antigens as well as vectors, host cells, antibodies directed to colon cancer antigens and the recombinant or synthetic methods for producing the same. Also provided are diagnostic methods for diagnosing and treating, preventing and/or prognosing disorders related to the colon, including colon cancer, and therapeutic methods for treating such disorders. The invention further relates to screening methods for identifying agonists and antagonists of colon cancer antigens of the invention. The present invention further relates to inhibiting the prodn. and function of the polypeptides of the present invention.

L2 ANSWER 10 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 2000:832310 CAPLUS

DOCUMENT NUMBER: 135:135386

TITLE: Relationship between apoptosis and expression of c-met oncogene in gastric carcinomas

AUTHOR(S): Zhuang, Xiaoqiang; Lin, Sanren; Zheng, Jie;
Wang, Lixin; Sun, Guihua; Li, Yan

CORPORATE SOURCE: Department of Gastroenterology, General Hospital
of Guangzhou Command of PLA, Canton, 510010,
Peop. Rep. China

SOURCE: Guangdong Yixue (2000), 21(10), 833-835

CODEN: GUYIEG; ISSN: 1001-9448

PUBLISHER: Guangdongsheng Yixue Qingbao Yanjiuso

Searcher : Shears 308-4994

09/867034

DOCUMENT TYPE: Journal
LANGUAGE: Chinese

AB The relationship between expression of c-met oncogene and apoptosis in gastric mucosal lesions was studied, and the prognostic significance of gastric carcinomas (GC) was discussed. Expression of c-met was investigated in 145 gastric mucosal lesions by immunohistochem. TUNEL method was used to detect apoptosis. Survival anal. was performed by the long rank test. The expression rates of c-met were 24%, 51%, 62%, 67% and 68%, resp. for chronic superficial gastritis (CSG), chronic atrophic gastritis and intestinal metaplasia (CAC+IM), dysplasia, early GC and advanced GC. The pos. rates were higher in CAG+IM, DYS and GC than that in CSG (P < 0.05). Apoptotic indexes (AI) of the 5 groups were: (4.55 \pm 2.33)%, (6.43 \pm 5.60)%, (6.45 \pm 5.12)%, (6.55 \pm 4.80)%, and %. AI was higher in advanced GC than that in CSG (P < 0.05). Expression of c-met was pos. correlated with AI (P < 0.01). Expression of c-met was also correlated significantly with histol. type, serosal invasion and lymph node metastasis. The expression c-met was significantly higher in Borrmann type 4 GC than that in early GC or in Borrmann type 1,2 (P < 0.01). The survival rate of patients with expression of c-met was significantly lower than that of patients with no expression. The expression of c-met may be assocd. with apoptosis and malignant transformation of gastric mucosa, suggesting that expression of c-met may be a new prognostic factor in gastric carcinoma.

L2 ANSWER 11 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 2000:161492 CAPLUS

DOCUMENT NUMBER: 132:204018

TITLE: Diagnosis and staging of various cancers by detection of cancer-specific genes (CSG) and antibody-based treatment

INVENTOR(S): Salceda, Susana; Sun, Yongming; Recipon, Herve; Cafferkey, Robert

PATENT ASSIGNEE(S): Diadexus Llc, USA

SOURCE: PCT Int. Appl., 58 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2000012758	A1	20000309	WO 1999-US19655	19990901
W: CA, JP, US				
RW: AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE				
EP 1109937	A1	20010627	EP 1999-946662	19990901
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, FI				

PRIORITY APPLN. INFO.: US 1998-98880 P 19980902
WO 1999-US19655 W 19990901

AB The present invention provides a new method for detecting, diagnosing, monitoring, staging, and prognosticating selected cancers including gynecol. cancers such as breast, ovarian, uterine and endometrial cancer and lung cancer by measurement of the levels

09/867034

of cancer-specific genes (CSG) in cells, tissue, or bodily fluid of a control patient and in a cancer patient, where elevated CSG levels indicated the presence of cancer, and further elevated levels the occurrence of **metastasis**. Cancer-specific gene sequences are presented which may be used as diagnostic markers for the presence of CSG. Antibodies to these sequences labeled with paramagnetic ions or radioisotopes may be used for imaging the cancer, and antibodies conjugated to cytotoxic agents may be used therapeutically.

REFERENCE COUNT: 3
REFERENCE(S): (1) Croce; US 5939258 A 1999 CAPLUS
(2) Paoloni-Giacobino; Genomics 1997, V44, P309
(3) Yu; US 5733748 A 1998 CAPLUS

L2 ANSWER 12 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 2000:116933 CAPLUS

DOCUMENT NUMBER: 132:177721

TITLE: A novel method of diagnosing, monitoring, staging, imaging and treating **colon cancer** by determining **colon-specific genes** in body fluids and tissues

INVENTOR(S): Sun, Yongming; Recipon, Herve; Macina, Roberto A.

PATENT ASSIGNEE(S): Diadexus Llc, USA

SOURCE: PCT Int. Appl., 42 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2000007632	A1	20000217	WO 1999-US16357	19990720
W: CA, JP, US				
RW: AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE				
EP 1107798	A1	20010620	EP 1999-937328	19990720
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, FI				

PRIORITY APPLN. INFO.: US 1998-95231 P 19980804
WO 1999-US16357 W 19990720

AB The present invention provides new methods for detecting, diagnosing, monitoring, staging, prognosticating, imaging and treating **colon cancer** that involves detg. levels of **colon-specific gene** activity in body fluids and tissues.

REFERENCE COUNT: 2
REFERENCE(S): (1) Soppet; US 5861494 1999 CAPLUS
(2) Yu; US 5733748 1998 CAPLUS

L2 ANSWER 13 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 1999:753379 CAPLUS

DOCUMENT NUMBER: 132:1796

TITLE: A novel method of diagnosing, monitoring, and staging **colon cancer** based on **colon-specific**

09/867034

INVENTOR(S): gene expression
Macina, Roberto A.; Yang, Fei; Sun, Yongming
PATENT ASSIGNEE(S): Diadexus Llc, USA
SOURCE: PCT Int. Appl., 47 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 9960161	A1	19991125	WO 1999-US10498	19990512
W: CA, JP, US				
RW: AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE				
EP 1080227	A1	20010307	EP 1999-924210	19990512
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, FI				

PRIORITY APPLN. INFO.: US 1998-86266 P 19980521
WO 1999-US10498 W 19990512

AB The present invention provides a new method for detecting, diagnosing, monitoring, staging, and prognosticating **colon cancer** vis nine **colon-specific genes (CSGs)**. Electronic subtractions, transcript imaging and protein functions searches were used to identify clones whose component EST's were exclusively or more frequently found in libraries from specific tumors. Six clones were identified whose expression predominantly occurs in the **colon**, and 1 of these clones was useful as a diagnostic marker for lung **cancer**.

REFERENCE COUNT: 1
REFERENCE(S): (1) Human Genome Sciences Inc; WO 9639419 A1
1996 CAPLUS

L2 ANSWER 14 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 1999:495387 CAPLUS

DOCUMENT NUMBER: 131:154486

TITLE: Human genes and gene expression products from a colon cancer cell line KM12L4-A cDNA library

INVENTOR(S): Williams, Lewis T.; Escobedo, Jaime; Innis, Michael A.; Garcia, Pablo Dominguez; Sudduth-Klinger, Julie; Reinhard, Christoph; Giese, Klaus; Randazzo, Filippo; Kennedy, Giulia C.; Pot, David; Kassam, Altaf; Lamson, George; Drmanac, Radoje; Crkvenjakov, Radomir; Dickson, Mark; Drmanac, Snezana; Labat, Ivan; Leshkowitz, Dena; Kita, David; Garcia, Veronica; Jones, William Lee; Stache-Crain, Birjit

PATENT ASSIGNEE(S): Chiron Corporation, USA; Hyseq Inc.

SOURCE: PCT Int. Appl., 2479 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 4

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
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Searcher : Shears 308-4994

 WO 9938972 A2 19990805 WO 1999-US1619 19990128
 WO 9938972 A3 19991223
 W: AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CU, CZ,
 DE, DK, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN,
 IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MD,
 MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI,
 SK, SL, TJ, TM, TR, TT, UA, UG, US, UZ, VN, YU, ZW, AM, AZ,
 BY, KG, KZ, MD, RU, TJ, TM
 RW: GH, GM, KE, LS, MW, SD, SZ, UG, ZW, AT, BE, CH, CY, DE, DK,
 ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF,
 CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG
 AU 9924716 A1 19990816 AU 1999-24716 19990128
 EP 1053319 A2 20001122 EP 1999-904288 19990128
 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC,
 PT, IE, FI

PRIORITY APPLN. INFO.:

US 1998-72910 P 19980128
 US 1998-75954 P 19980224
 US 1998-80114 P 19980331
 US 1998-80515 P 19980403
 US 1998-80666 P 19980403
 US 1998-105234 P 19981021
 US 1998-105877 P 19981027
 WO 1999-US1619 W 19990128

AB This invention relates to novel human polynucleotides and variants thereof, their encoded polypeptides and variants thereof, to genes corresponding to these polynucleotides and to proteins expressed by the genes. The invention provides the nucleotide sequences for 2502 human polynucleotides isolated as cDNA clones from the human colon cancer cell line KM12L4-A, 2600 validation sequence, plus 146 sequences assembled as contigs. Many of the cDNA sequences provided are differentially expressed in the cancerous state (colon cancer, lung cancer, breast cancer) or in specific tissues (e.g., colon). Database homol. searches identified various protein families that encompass some of the putative protein products. Diagnostic and therapeutic agents employing such novel human polynucleotides, their corresponding genes or gene products, e.g., these genes and proteins, including probes, antisense constructs, and antibodies, are also provided.

L2 ANSWER 15 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 1999:298090 CAPLUS

DOCUMENT NUMBER: 131:111015

TITLE: Extract of Solanum muricatum (pepino/CSG)
) inhibits tumor growth by inducing apoptosis

AUTHOR(S): Ren, Weiping; Tang, Dean G.

CORPORATE SOURCE: Virotech Canada Inc., Windsor, ON, N8W 3K5, Can.

SOURCE: Anticancer Res. (1999), 19(1A), 403-408

CODEN: ANTRD4; ISSN: 0250-7005

PUBLISHER: International Institute of Anticancer Research

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Apoptosis, or programmed cell death, is characterized by certain distinct morphol. and biochem. features. Most chemotherapeutic drugs exert their anti-tumor effects by inducing apoptosis. Therefore, an effective compd. inducing apoptosis appears to be a relevant strategy to suppress various human tumors. In a search for tumor inhibitors from various kinds of plants, we found that exts.

from *Solanum muricatum* (CSG) can inhibit tumor growth both in vivo and in vitro by inducing apoptosis. A lyophilized aq. fraction extd. from *Solanum muricatum* (CSG) was used in this study. The human cell lines tested include: prostate (PC3, DU145), stomach (MKN45), liver (QGY-7721, SK-HEP-1), breast (MDA-MB-435), ovarian (OVCAR), **colon** (HT29) and lung (NCI-H209) **cancer** cells; NHP (prostate), HUVEC (umbilical vein endothelial cell), and WI-38 (lung diploid fibroblasts) normal cells. The cell survival was detd. by either Cell Titer MTS cell proliferation kit or trypan blue dye exclusion assay. The apoptosis was analyzed by (a) apoptotic morphol. by light microscopy; (b) DNA ladder formation; (c) PARP cleavage assay. A) **CSG** possesses selective cytotoxic activity against all the tumor cell lines being tested. The LD50 value is 561-825 .mu.g/mL. B) **CSG** showed a much lower cytotoxicity to NHP, HUVEC and WI-38 normal cell lines with LD50 value being 2.8-3.2 mg/mL, which is 3-6 fold higher than on tumor cells. C) The in vivo study demonstrated that injection of **CSG** (100 .mu.g) directly into tumor mass can reduce the tumor vol. dramatically in nude mice inoculated with MKN45 gastric cancer cells. D) **CSG**-mediated tumor growth inhibition is through induction of apoptotic cell death, as manifested by (a) typical apoptotic morphol.; (b) DNA ladder formation; and (c) PARP cleavage assay. Taken together, the present study suggests, for the first time, that **CSG** may represent promising new chem. entity which preferentially targets various tumor cells by triggering apoptosis.

REFERENCE COUNT: 17

REFERENCE(S): (2) Chiang, H; Anticancer Res 1991, V11, P1911
CAPLUS
(4) Hickman, J; Cancer Metastasis Rev 1992, V11,
P121 CAPLUS
(5) Hsu, S; Biochem Biophys Res Com 1996, V229,
P1 CAPLUS
(7) Mohanan, P; Cancer Lett 1996, V110, P71
CAPLUS
(8) Mohanan, P; Cancer Lett 1997, V112, P219
CAPLUS

ALL CITATIONS AVAILABLE IN THE RE FORMAT

L2 ANSWER 16 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 1998:794684 CAPLUS

DOCUMENT NUMBER: 130:221220

TITLE: Significance of CD44S and CD44V6 expression in gastric carcinoma

AUTHOR(S): Li, Xueyan; Hu, Jialu

CORPORATE SOURCE: Department of Digestive Medicine, 4th Military Medical University Xijing Hospital, Xi'an, 710033, Peop. Rep. China

SOURCE: Disi Junyi Daxue Xuebao (1998), 19(5), 534
CODEN: DJDXEG; ISSN: 1000-2790

PUBLISHER: Disi Junyi Daxue Xuebao Bianjibu

DOCUMENT TYPE: Journal

LANGUAGE: Chinese

AB CD44 is a surface adhesion protein, its variants were assocd. with tumor **metastasis**. CD44S and CD44V6 expression were examd. by immunohistochem. staining in 54 benign gastric disease including 33 chronic superficial gastritis (CSG), 21 chronic atrophic gastritis (CAG) accompanied intestinal **metastasis**

09/867034

(IM), and 63 gastric carcinoma (GC) including 35 cases with, and 28 cases without lymph node **metastasis**. The pos. expression of CD44S in CSG, CAG/IM, and GC were 45.5, 57.1, and 52.4%; and CD44V6 were 0, 19.1, and 53.9% resp. CD44S expression in intestinal type gastric carcinoma and diffused type gastric carcinoma were 55.3 and 48%, $P > 0.05$; while CD44V6 expression were 73.7 and 24%, $P < 0.05$. CD44S and CD44V6 expression were not related with gastric carcinoma histol. type and tumor size. CD44S expression in gastric carcinoma with or without **metastasis** were 46.7 and 60.7%, $P > 0.05$; while CD44V6 expression were 68.8 and 35.7%, $P < 0.05$. The CD44V6 expression was significantly higher in intestinal type and lymph node **metastasized** gastric carcinoma. The results suggest that the CD44S and CD44V6 expression might be indexes in evaluation and prediction of lymph node **metastasis** of gastric carcinoma.

L2 ANSWER 17 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 1998:202636 CAPLUS
DOCUMENT NUMBER: 128:240996
TITLE: Human **colon**-specific cDNA and protein sequences and use as diagnostic markers for **colon cancer** presence and **metastasis**
INVENTOR(S): Yu, Guo-Liang; Rosen, Craig
PATENT ASSIGNEE(S): Human Genome Sciences, Inc., USA
SOURCE: U.S., 50 pp.
CODEN: USXXAM
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 5733748	A	19980331	US 1995-469667	19950606
US 6337195	B1	20020108	US 1998-224110	19980331

PRIORITY APPLN. INFO.: US 1995-469667 A3 19950606

AB Human **colon specific gene** polypeptides and DNA (RNA) encoding such polypeptides are claimed, along with procedures for producing these polypeptides by recombinant techniques, their use as diagnostic markers for **colon cancer** presence and progression, antibodies to the polypeptides which may be used as a vaccine, and methods for screening for agonists and antagonists which may have therapeutic use.

L2 ANSWER 18 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 1997:105242 CAPLUS
DOCUMENT NUMBER: 126:114205
TITLE: Human **colon-specific genes** and proteins
INVENTOR(S): Yu, Guo-Liang; Rosen, Craig A.
PATENT ASSIGNEE(S): Human Genome Sciences, Inc., USA; Yu, Guo-Liang; Rosen, Craig A.
SOURCE: PCT Int. Appl., 79 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English

Searcher : Shears 308-4994

09/867034

FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 9639419	A1	19961212	WO 1995-US7289	19950606
W:	AM, AT, AU, BB, BG, BR, BY, CA, CH, CN, CZ, DE, DK, ES, FI, GB, GE, HU, JP, KE, KG, KP, KR, KZ, LK, LT, LU, LV, MD, MG, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SI, SK, TJ, TT, UA, US, UZ, VN			
RW:	KE, MW, SD, SZ, UG, AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR, NE, SN, TD, TG			
CA 2221798	AA	19961212	CA 1995-2221798	19950606
AU 9528205	A1	19961224	AU 1995-28205	19950606
EP 847398	A1	19980617	EP 1995-923764	19950606
R:	AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE			
JP 11506342	T2	19990608	JP 1995-500380	19950606

PRIORITY APPLN. INFO.: WO 1995-US7289 19950606

AB Thirteen human colon-specific cDNAs and their deduced amino acid sequences and procedures for producing such polypeptides by recombinant techniques are provided. Two of the cDNAs are full-length. Also disclosed are methods for utilizing such polypeptides or polypeptides as a diagnostic marker for **colon cancer** and as an agent to det. if **colon cancer** has **metastasized**. Also disclosed are antibodies specific to the **colon-specific gene** polypeptides which may be used to target **cancer** cells and be used as part of a **colon cancer** vaccine. Methods of screening for agonists and antagonists for the polypeptides and therapeutic uses of the antagonists are disclosed.

L2 ANSWER 19 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 1995:200493 CAPLUS

DOCUMENT NUMBER: 122:7233

TITLE: A gene expressed in colon mucosa gene that is expressed at lower levels in colon adenomas and adenocarcinomas

INVENTOR(S): Schweinfest, Clifford W.; Papas, Takis S.

PATENT ASSIGNEE(S): United States Dept. of Health and Human Services, USA

SOURCE: PCT Int. Appl., 44 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 9420616	A1	19940915	WO 1994-US1860	19940304
W:	AU, CA, JP			
RW:	AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE			
AU 9463508	A1	19940926	AU 1994-63508	19940304
US 5569755	A	19961029	US 1995-424567	19950417

Searcher : Shears 308-4994

09/867034

US 5831015 A 19981103 US 1996-711928 19960911
US 6210887 B1 20010403 US 1998-184937 19981102
PRIORITY APPLN. INFO.: US 1993-26045 A 19930305
WO 1994-US1860 W 19940304
US 1995-424567 A3 19950417
US 1996-711928 A3 19960911

AB A new gene called DRA, for down regulated in adenoma, is expressed at lower levels in **colon** adenomas than in normal tissues, maps to chromosome 7 and is believed to encode a **tumor** suppressor. The DRA gene encodes a highly hydrophobic protein with charged clusters located primarily in the carboxyl terminus. The mRNA appears to be strictly limited to the mucosa of normal colon and it is down-regulated early in colon tumorigenesis. Absence of the DRA polypeptide in tissue that usually expresses it can be used as an indicator of tissue abnormality. The DRA gene and cDNA may also have therapeutic uses. A cDNA from the gene was cloned by differential screening of banks from normal colon and colon adenocarcinoma.

L2 ANSWER 20 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 1993:78665 CAPLUS

DOCUMENT NUMBER: 118:78665

TITLE: Inherited and somatic mutations of the APC gene associated with colorectal cancer of humans

INVENTOR(S): Kinzler, Kenneth W.; Vogelstein, Bert; Anand, Rakesh; Hedge, Philip John; Markham, Alexander Fred; Albertsen, Hans; Carlson, Mary L.; Groden, Joanna L.; Joslyn, Geoff; et al.

PATENT ASSIGNEE(S): Johns Hopkins University, USA; Imperial Chemical Industries PLC; University of Utah; Cancer Institute

SOURCE: PCT Int. Appl., 138 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 2

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 9213103	A1	19920806	WO 1992-US376	19920116
W: AT, AU, BB, BG, BR, CA, CH, CS, DE, DK, ES, FI, GB, HU, JP, KP, KR, LK, LU, MG, MN, MW, NL, NO, PL, RO, RU, SD, SE				
RW: AT, BE, BF, BJ, CF, CG, CH, CI, CM, DE, DK, ES, FR, GA, GB, GN, GR, IT, LU, MC, ML, MR, NL, SE, SN, TD, TG				
US 5352775	A	19941004	US 1991-741940	19910808
AU 9213669	A1	19920827	AU 1992-13669	19920116
EP 569527	A1	19931118	EP 1992-906080	19920116
EP 569527	B1	20010314		
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, MC, NL, SE				
JP 07500241	T2	19950112	JP 1992-506203	19920116
AT 199746	E	20010315	AT 1992-906080	19920116
PRIORITY APPLN. INFO.:			GB 1991-963	A 19910116
			US 1991-741940	A 19910808
			GB 1991-962	A 19910116
			GB 1991-974	A 19910116
			GB 1991-975	A 19910116
			WO 1992-US376	A 19920116

09/867034

AB A human gene that shows inherited and somatic mutations assocd. with colorectal cancer is cloned and characterized. The gene and its product are useful as markers in the diagnosis and prognosis of the disease. A series of YAC clones of the 5q21 region were cloned by screening with markers for the region. Six genes expressed in normal **colon** cells and in colorectal, lung and bladder **tumors** were found in the region. These genes were: the FER gene at 5q11-23 similar to the v-abl gene; TB1 showing some similarity to brown adipose tissue uncoupling proteins; MCC and TB2; and APC. A cDNA from the APC gene had an open reading frame of 8,535 nucleotides that encoded a protein with some similarity to myosins and intermediate filament proteins and to the ral2 gene product of yeast. The assocn. of these genes and mutant alleles with colorectal cancer was studied by std. methods. The gene that showed the greatest no. of germline and somatic mutations was APC and the characterization of a no. of the mutations is described.

(FILE 'MEDLINE, BIOSIS, EMBASE, WPIDS, CONFSCI, SCISEARCH, JICST-EPLUS, JAPIO, CANCERLIT' ENTERED AT 10:08:11 ON 18 JAN 2002)

L3

28 S L2

L4

24 DUP REM L3 (4 DUPLICATES REMOVED)

L4 ANSWER 1 OF 24 WPIDS COPYRIGHT 2002 DERWENT INFORMATION LTD
ACCESSION NUMBER: 2001-616504 [71] WPIDS
DOC. NO. NON-CPI: N2001-459822
DOC. NO. CPI: C2001-184647
TITLE: New **colon cancer** specific
polypeptides and polynucleotides, useful for
detecting, diagnosing, monitoring, staging, imaging
and treating **cancers**, particularly
colon cancer.
DERWENT CLASS: B04 D16 S03
INVENTOR(S): HU, P; MACINA, R A; PIDERIT, A; RECIPON, H; YANG, F
PATENT ASSIGNEE(S): (DIAD-N) DIADEXUS INC
COUNTRY COUNT: 23
PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG

WO 2001073030	A2	20011004	(200171)*	EN	105
RW: AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE TR					
W: AU CA JP US					

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE

WO 2001073030	A2	WO 2001-US9737	20010326

PRIORITY APPLN. INFO: US 2000-192667P 20000328
AN 2001-616504 [71] WPIDS
AB WO 200173030 A UPAB: 20011203
NOVELTY - An isolated **colon cancer** specific gene
(CSG) polynucleotide (I) comprising:
(a) one of 57 sequences (S1) of defined base pairs (bp) as
given in specification;
(b) its fragment of 15 contiguous nucleobases;

(c) a nucleic acid sequence which, due to degeneracy in genetic coding, has variations in (S1); or

(d) a nucleic acid sequence which hybridizes under stringent conditions to an antisense sequence of (S1), is new.

DETAILED DESCRIPTION - An isolated **colon cancer** specific gene (CSG) polynucleotide (I) comprising:

(a) one of 57 sequences (S1) of defined base pairs (bp) as given in specification such as 523, 528, 478, 495, 455, 489, 545, 220, 484, 350, 322, 306, 143, 508, 582, 582, 521, 244 and 600 bp;

(b) its fragment of 15 contiguous nucleobases;

(c) a nucleic acid sequence which, due to degeneracy in genetic coding, has variations in (S1); or

(d) a nucleic acid sequence which hybridizes under stringent conditions to an antisense sequence of (S1), is new.

INDEPENDENT CLAIMS are also included for the following:

(1) an antisense oligonucleotide (II) which hybridizes to (I);

(2) a vector (III) comprising (I);

(3) a host cell (IV) comprising (III);

(4) a **CSG** polypeptide (V) encoded by (I);

(5) producing (V);

(6) producing a cell expressing (V) by transforming or transfecting a cell with (III) so that the cell under appropriate culture conditions, expresses (V);

(7) an antibody (VI) which is immunospecific for (V);

(8) a **colon cancer** specific gene (CSG) for diagnosing **colon cancer**, comprising (I) or (V);

(9) a **CSG** polypeptide agonist or antagonist identified using (V); and

(10) a vaccine (VII) comprising (V) or a vector expressing (V) which induces an immune response against (V) in a mammal.

ACTIVITY - Cytostatic.

MECHANISM OF ACTION - Vaccine; gene therapy. No supporting data is given.

USE - **CSG** is useful for diagnosing, staging, monitoring **colon cancer** for onset of

metastasis or a change in stage of **colon cancer**, diagnosing **metastases** of **colon cancer** in a patient, by determining levels of **CSG**

in a sample of cells, tissues, or body fluids and comparing it with levels of **CSG** in normal human control, where an increase in determined **CSG** level is associated with **cancer**

. **CSG** is also useful for identifying potential therapeutic agents for use in imaging and treating **colon cancer**, by screening molecules for ability to bind to

CSG. (V) is useful for identifying compounds which antagonize or agonize the **CSG** polypeptide, by contacting

cells or cell membrane which express (V) with a candidate compound and monitoring the cells for changes in **CSG** polypeptide activities or binding as compared to cells or cell membranes not

contacted with the candidate compound. (VI) labeled with paramagnetic ions or a radioisotope is useful for imaging

colon cancer and (VI) conjugated to a cytotoxic agent is useful for treating **colon cancer**. (VII)

is useful for inducing an immune response against **CSG** polypeptide and treating **colon cancer** (all

claimed). (I), (V) and (VI) are useful for detecting the effect of

09/867034

added compounds on the production of **CSG** mRNA and polypeptides in cells. (V) is also useful to identify membrane bound or soluble receptors. (VI) is useful to isolate or identify clones expressing **CSG** polypeptide and to purify the polypeptides by affinity chromatography.

Dwg.0/0

L4 ANSWER 2 OF 24 WPIDS COPYRIGHT 2002 DERWENT INFORMATION LTD
ACCESSION NUMBER: 2001-389934 [41] WPIDS
DOC. NO. CPI: C2001-118811
TITLE: Novel cancer specific gene and its protein useful for detecting, diagnosing, monitoring, staging, prognosticating, imaging and treating prostate cancer.
DERWENT CLASS: B04 D16
INVENTOR(S): ALI, S; CAFFERKEY, R; RECIPON, H; SUN, Y
PATENT ASSIGNEE(S): (DIAD-N) DIADEXUS INC
COUNTRY COUNT: 21
PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
WO 2001039798	A1	20010607	(200141)*	EN	52
RW: AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE TR					
W: CA JP					

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 2001039798	A1	WO 2000-US32927	20001205

PRIORITY APPLN. INFO: US 1999-169083P 19991206

AN 2001-389934 [41] WPIDS

AB WO 200139798 A UPAB: 20010724

NOVELTY - A cancer specific gene (**CSG**) (I) comprising a sequence (S1) of 310, 2994, 230, 660, 191 or 647 nucleotides (nts) fully defined in the specification or its variant, a protein or its variant expressed by S1, or a polynucleotide which is capable of hybridizing under stringent conditions to an antisense sequence of S1, is new.

DETAILED DESCRIPTION - INDEPENDENT CLAIMS are also included for the following:

(1) diagnosing (M1) the presence of prostate cancer in a patient, by determining levels of **CSG** in samples (Sa1) such as cells, tissues or bodily fluids in a patient, and comparing the determined levels of **CSG** with levels of **CSG** in samples (Sa2) such as cells, tissues or bodily fluids from a normal human control;

(2) diagnosing (M2) **metastases** of prostate cancer in a patient, by identifying a patient having prostate cancer that is not known to have **metastasized**, determining **CSG** levels in Sa1, and comparing the determined **CSG** levels with levels of **CSG** in Sa2, where an increase in determined **CSG** levels in the patient versus normal human control is associated with a cancer which has **metastasized**;

(3) staging (M3) prostate cancer in a patient, by identifying a

patient having prostate cancer, determining **CSG** levels in Sa1, and comparing the determined **CSG** levels with levels of **CSG** in Sa2, where an increase in determined **CSG** levels in the patient versus the normal human control is associated with a cancer which is progressing and a decrease in the determined **CSG** levels is associated with a cancer which is regressing or in remission;

(4) monitoring (M4) prostate cancer in a patient for the onset of **metastasis**, by identifying a patient having prostate cancer that is not known to have **metastasized**, periodically determining **CSG** levels in Sa1, and comparing them with levels of **CSG** in Sa2, where an increase in any one of the determined **CSG** levels in the patient versus normal human control is associated with a cancer which has **metastasized**;

(5) monitoring (M5) a change in stage of prostate cancer in a patient, by identifying a patient having prostate cancer, periodically determining **CSG** levels in Sa1 fluids from the patient, and comparing them with levels of **CSG** in Sa2, where an increase in any one of the determined **CSG** levels in the patient versus normal human control is associated with a cancer which is progressing in stage and a decrease is associated with a cancer which is regressing in stage or in remission;

(6) identifying (M6) potential therapeutic agents for use in imaging and treating prostate cancer, by screening molecules for an ability to bind to **CSG**, which is indicative of the molecule being useful in imaging and treating prostate cancer;

(7) an antibody (Ab) which specifically binds (I);

(8) treating (M7) prostate cancer in a patient, by administering (Ab), or a molecule which downregulates expression or activity of a **CSG**;

(9) imaging (M8) prostate cancer by administering (Ab); and

(10) a vaccine for treating prostate cancer comprising (I).

ACTIVITY - Cytostatic.

MECHANISM OF ACTION - Gene therapy; vaccine. No supporting data given.

USE - Ab is useful for imaging and treating prostate cancer in a patient. **CSG** protein is useful for inducing an immune response against a target cell expressing a **CSG** (claimed).

(I) is useful as diagnostic marker for detecting, diagnosing (**metastases** and disease), monitoring (cancer and changes in cancer), staging, prognosticating, imaging and treating prostate cancer (all claimed).

ADVANTAGE - The method is more sensitive and accurate for staging human cancer.

Dwg.0/0

L4 ANSWER 3 OF 24 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 2001189505 EMBASE

TITLE: hTERT expression and cellular immunity in gastric cancer and precancerosis.

AUTHOR: Yao X.X.; Yin L.; Zhang J.Y.; Bai W.Y.; Li Y.M.; Sun Z.C.

CORPORATE SOURCE: Dr. X.X. Yao, Department of Digestive Medicine, 2nd Hosp. of Hebei Med. University, Shijiazhuang 050000, Hebei Province, China. Yaouxixian@263.net

SOURCE: World Chinese Journal of Digestology, (2001) 9/5 (508-512).

09/867034

Refs: 51
ISSN: 1009-3079 CODEN: SHXZF2
COUNTRY: China
DOCUMENT TYPE: Journal; Article
FILE SEGMENT: 016 Cancer
026 Immunology, Serology and Transplantation
048 Gastroenterology
LANGUAGE: Chinese
SUMMARY LANGUAGE: English; Chinese

AB AIM To observe the expression of human telomerase reverse transcriptase (hTERT) in gastric carcinomas and precancerous lesions, evaluate the immune state of such patients, and to study the clinical implications of hTERT and immune state for the diagnosis, treatment and prognosis of gastric cancer. METHODS In situ hybridization was used to detect the expression of hTERT mRNA in 116 endoscopic biopsies of gastric mucosa. Tissue samples were analyzed as follows: 30 cases of chronic superficial gastritis (CSG), 44 of precancerous lesions (including 27 of chronic atrophy gastritis, 8 of hyperplastic ploy and 9 of gastric ulcer) and 42 of gastric cancer (GC). At mean time, the T lymphocyte subsets (CD3(+), CD4(+), CD8(+), CD4(+) / CD8(+)) and natural killer cell (NK) in peripheral blood were determined by flow cytometrical analysis (FCM) in 30 cases of CSG, 27 of precancerosis (chronic atrophy gastritis, CAG), 42 of GC and the data were campared with those of normal controls (NC). RESULTS The positive rate of hTERT varied as follows: 0%(0/ 30) in CSG, 36% (16/ 44) in precancerous lesions and 86% (36/ 42) in GC. The expression of hTERT mRNA was not associated with patients gender, tumor location, macroscopic type, lymph node **metastasis** and degree of differentiation. The CD3(+) and CD4(+) of CSG were lower than that of NC ($P<0.05$). Meanwhile, the T lymphocyte subsets (CD3(+), CD4(+), CD4(+) / CD8(+) ratio) were remarkably lower than that of NC and CSG ($P<0.05-0.01$). Values of T cells and NK cells of GC group were abnormal significantly as compared with CAG ($P<0.05-0.01$). Furthermore, with the tumor progression, the function of T cells was weakened gradually. CONCLUSION The expression of telomerase may be a crucial step in gastric carcinogenesis and increased hTERT mRNA may serve as a novel marker for diagnosis of gastric cancer. The immune state of patients with gastric cancer and precancerosis was somewhat depressed, which indicates the importance of cellular immunity in cancer patients.

L4 ANSWER 4 OF 24 BIOSIS COPYRIGHT 2002 BIOSIS
ACCESSION NUMBER: 2001:114238 BIOSIS
DOCUMENT NUMBER: PREV200100114238
TITLE: **Colon specific gene** and protein.
AUTHOR(S): Soppet, Daniel R.; Li, Yi; Dillon, Patrick J. (1)
CORPORATE SOURCE: (1) Gaithersburg, MD USA
ASSIGNEE: Human Genome Sciences, Inc.
PATENT INFORMATION: US 6080722 June 27, 2000
SOURCE: Official Gazette of the United States Patent and Trademark Office Patents, (June 27, 2000) Vol. 1235, No. 4, pp. No Pagination. e-file.
ISSN: 0098-1133.
DOCUMENT TYPE: Patent
LANGUAGE: English
AB Human **colon specific gene** polypeptides

09/867034

and DNA (RNA) encoding such polypeptides and a procedure for producing such polypeptides by recombinant techniques is disclosed. Also disclosed are methods for utilizing such polynucleotides or polypeptides as a diagnostic marker for **colon cancer** and as an agent to determine if **colon cancer** has **metastasized**. Also disclosed are antibodies specific to the **colon specific gene** polypeptides which may be used to target **cancer** cells and be used as part of a **colon cancer** vaccine. Methods of screening for agonists and antagonists for the polypeptide and therapeutic uses of the antagonists are also disclosed.

L4 ANSWER 5 OF 24 WPIDS COPYRIGHT 2002 DERWENT INFORMATION LTD
ACCESSION NUMBER: 2000-339531 [29] WPIDS
DOC. NO. NON-CPI: N2000-254921
DOC. NO. CPI: C2000-103001
TITLE: Diagnosing, staging and monitoring the presence and **metastases** of prostate cancer especially useful for treating prostate cancer comprises measuring changes in cancer specific gene levels.
DERWENT CLASS: B04 D16 S03
INVENTOR(S): CAFFERKEY, R; RECIPON, H; SALCEDA, S
PATENT ASSIGNEE(S): (DIAD-N) DIADEXUS INC; (DIAD-N) DIADEXUS LLC
COUNTRY COUNT: 22
PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
WO 2000023111	A1	20000427	(200029)*	EN	74
RW: AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE					
W: CA JP US					
EP 1131095	A1	20010912	(200155)	EN	
R: AT BE CH CY DE DK ES FI FR GB GR IE IT LI LU MC NL PT SE					

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 2000023111	A1	WO 1999-US24331	19991019
EP 1131095	A1	EP 1999-955004	19991019
		WO 1999-US24331	19991019

FILING DETAILS:

PATENT NO	KIND	PATENT NO
EP 1131095	A1 Based on	WO 200023111

PRIORITY APPLN. INFO: US 1998-104737P 19981019

AN 2000-339531 [29] WPIDS

AB WO 200023111 A UPAB: 20000617

NOVELTY - A method for diagnosing the presence of prostate cancer in a patient, comprising determining levels of cancer specific genes (CSG) in cells, tissues or bodily fluids, and comparing the determined levels of CSG with levels of CSG from a normal human control, is new. A change in determined levels of CSG in the patient versus the control is associated with the

presence of prostate cancer.

DETAILED DESCRIPTION - INDEPENDENT CLAIMS are also included for the following:

(1) a method of diagnosing **metastases** of prostate cancer in a patient comprising:

(a) identifying a patient having prostate cancer that is not known to have **metastasized**;

(b) determining **CSG** levels in a sample of cells, tissues, or bodily fluid from the patient; and

(c) comparing the determined **CSG** levels with **CSG** levels of a normal human control, where an increase in **CSG** levels in the patient versus the control, is associated with a cancer which has **metastasized**;

(2) a method of staging prostate cancer in a patient having prostate cancer, comprising:

(a) identifying a patient having prostate cancer;

(b) determining **CSG** levels in a sample of cells, tissue, or bodily fluid from the patient; and

(c) comparing determined **CSG** levels with **CSG** levels of a normal human control, where an increase in **CSG** levels in the patient versus the control is associated with a progressing cancer, and a decrease in the **CSG** levels is associated with a regressing cancer;

(3) a method of monitoring prostate cancer in a patient for the onset of **metastasis** comprising:

(a) identifying a patient having prostate cancer that is not known to have **metastasized**;

(b) periodically determining **CSG** levels in samples of cells, tissues, or bodily fluid from the patient; and

(c) comparing the **CSG** levels with **CSG** levels of **CSG** of a normal human control, where an increase in any one of the periodically determined **CSG** levels in the patient versus the control is associated with a cancer which has **metastasized**;

(4) a method of monitoring a change in stage of prostate cancer in a patient comprising:

(a) identifying a patient having prostate cancer;

(b) periodically determining levels of **CSG**;

(c) comparing the **CSG** levels with **CSG** levels of a normal human control, where an increase in any one of the periodically determined **CSG** levels in the patient versus the control is associated with a progressing cancer, and a decrease is associated with a regressing cancer;

(5) a method of identifying potential therapeutic agents for use in imaging and treating prostate cancer, comprising screening molecules for an ability to bind to **CSG**, which indicates the molecule is useful in imaging and treating prostate cancer;

(6) an antibody which specifically binds **CSG**; and

(7) a method of imaging or treating prostate cancer in a patient by administering an antibody of (7).

ACTIVITY - Cytostatic.

MECHANISM OF ACTION - The antibody, conjugated to a cytotoxic agent, binds to cancer specific genes, in vivo.

USE - The method is useful for diagnosing, staging and monitoring the presence and **metastases** of cancer (claimed). The antibodies which specifically binds **CSG** or fragments of such antibodies can be used in treating prostate cancer, and to detect or image, localization of **CSG** in a

09/867034

patient in order to diagnose a disease or condition (claimed). The antibodies may also be used in the treatment of diseases characterized by the expression of **CSG**.

ADVANTAGE - The new method provides an earlier diagnosis for the presence and **metastasis** of prostate cancer, which significantly increase the chances of a cure. It provides a sensitive method for diagnosing, and staging, prostate cancer to determine if the cancer has **metastasized**, and for monitoring the progress or stage of the disease, which has not **metastasized**.

Dwg.0/0

L4 ANSWER 6 OF 24 WPIDS COPYRIGHT 2002 DERWENT INFORMATION LTD
ACCESSION NUMBER: 2000-339528 [29] WPIDS
DOC. NO. NON-CPI: N2000-254918
DOC. NO. CPI: C2000-102998
TITLE: Diagnosing, detecting, staging, monitoring, imaging and treating cancers, especially useful for detecting prostate cancer comprises measuring changes in levels of cancer specific genes in cells, tissues and body fluids.
DERWENT CLASS: B04 D16 S03
INVENTOR(S): ALI, S M; CAFFERKEY, R; RECIPON, H; SALCEDA, S; SUN, Y
PATENT ASSIGNEE(S): (DIAD-N) DIADEXUS INC; (DIAD-N) DIADEXUS LLC
COUNTRY COUNT: 22
PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
WO 2000023108	A1	20000427	(200029)*	EN	33
RW: AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE					
W: CA JP US					
EP 1126877	A1	20010829	(200150)	EN	
R: AT BE CH CY DE DK ES FI FR GB GR IE IT LI LU MC NL PT SE					

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 2000023108	A1	WO 1999-US23764	19991018
EP 1126877	A1	EP 1999-954867	19991018
		WO 1999-US23764	19991018

FILING DETAILS:

PATENT NO	KIND	PATENT NO
EP 1126877	A1 Based on	WO 200023108

PRIORITY APPLN. INFO: US 1998-104741P 19981019

AN 2000-339528 [29] WPIDS

AB WO 200023108 A UPAB: 20000617

NOVELTY - A method for diagnosing the presence of prostate cancer, comprising measuring levels of cancer specific genes (**CSG**) in cells, tissues or bodily fluids, and comparing the measured **CSG** levels with levels from a normal human control, where a change in measured **CSG** levels in the patient versus the

control is associated with the presence of prostate cancer.

DETAILED DESCRIPTION - INDEPENDENT CLAIMS are also included for the following:

- (1) a method for diagnosing the **metastases** of prostate cancer in a patient comprising:
 - (a) identifying a patient having prostate cancer that is not known to have **metastasized**;
 - (b) measuring **CSG** levels in cells, tissues or bodily fluid of the patient; and
 - (c) comparing the measured **CSG** levels with levels of a normal human control, where an increase in measured **CSG** levels in the patient versus the control is associated with a cancer which has **metastasized**;
- (2) a method for staging prostate cancer in a patient having prostate cancer comprising:
 - (a) identifying a patient having prostate cancer;
 - (b) measuring **CSG** levels in cells, tissues or bodily fluid of the patient; and
 - (c) comparing the measured **CSG** levels with levels of a normal human control, where an increase in measured **CSG** levels in the patient versus the control is associated with a cancer which is progressing, and a decrease in the measured **CSG** levels is associated with a cancer which is regressing or in remission;
- (3) a method of monitoring prostate cancer in a patient for the onset of **metastasis** comprising:
 - (a) identifying a patient having prostate cancer that is known to have **metastasized**;
 - (b) periodically measuring levels of **CSG** in samples of cells, tissues or bodily fluid from the patient;
 - (c) comparing the **CSG** levels with levels of a normal human control, where an increase in any one of the periodically measured **CSG** levels in the patient versus the control is associated with a cancer which has **metastasized**;
- (4) a method of monitoring a change in stage of prostate cancer in a patient comprising:
 - (a) identifying a patient having prostate cancer;
 - (b) periodically measuring levels of **CSG** in samples of cells, tissues or bodily fluid from the patient;
 - (c) comparing the **CSG** levels with levels of a normal human control, where an increase in any one of the periodically measured **CSG** levels in the patient versus the control is associated with a progressing cancer, and a decrease is associated with a regressing cancer.
- (5) an antibody which specifically binds **CSG**; and
- (6) a method of imaging or treating prostate cancer in a patient, comprising administering the antibody of (6).

ACTIVITY - Cytostatic.

MECHANISM OF ACTION - The antibody, conjugated to a cytotoxic agent, binds to cancer specific genes.

USE - The method is useful for diagnosing, detecting, staging, monitoring, and imaging for the presence and **metastases** of prostate cancer. The antibodies which specifically bind to **CSG** may be used to detect or image localization of **CSG** in a patient in order to detect or diagnose a disease or condition, and to treat prostate cancer. All claimed.

ADVANTAGE - The new method provides an earlier diagnosis for the presence and **metastasis** of prostate cancer, which

09/867034

significantly increase the chances of cure. It provides a sensitive method for diagnosing and staging of prostate cancer to determine whether or not such cancer has **metastasized**, and for monitoring the progress of the disease, which has not **metastasized** for the onset of **metastasis**.

Dwg.0/0

L4 ANSWER 7 OF 24 WPIDS COPYRIGHT 2002 DERWENT INFORMATION LTD
ACCESSION NUMBER: 2000-328946 [28] WPIDS
DOC. NO. NON-CPI: N2000-247638
DOC. NO. CPI: C2000-099678
TITLE: Detecting, diagnosing and monitoring
gastrointestinal cancers comprises measuring the
levels of cancer specific gene/protein 2 (CC2) in
tissues or bodily fluids.
DERWENT CLASS: B04 D16 S03
INVENTOR(S): MACINA, R A
PATENT ASSIGNEE(S): (DIAD-N) DIADEXUS LLC
COUNTRY COUNT: 22
PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
WO 2000020640	A1	20000413	(200028)*	EN	33
RW: AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE					
W: CA JP US					
EP 1117833	A1	20010725	(200143)	EN	
R: AT BE CH CY DE DK ES FI FR GB GR IE IT LI LU MC NL PT SE					

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 2000020640	A1	WO 1999-US22725	19990930
EP 1117833	A1	EP 1999-950047	19990930
		WO 1999-US22725	19990930

FILING DETAILS:

PATENT NO	KIND	PATENT NO
EP 1117833	A1 Based on	WO 200020640

PRIORITY APPLN. INFO: US 1998-102879P 19981002

AN 2000-328946 [28] WPIDS

AB WO 200020640 A UPAB: 20000613

NOVELTY - Diagnosing the presence of gastrointestinal cancer (GC), comprising measuring a change in levels of cancer specific gene/protein 2 (CC2) in cells, tissues or bodily fluids in a patient compared with CC2 levels in a normal human control, is new.

DETAILED DESCRIPTION - INDEPENDENT CLAIMS are also included for the following:

(1) diagnosing **metastases** of a GC in a patient, comprising:

(a) identifying a patient having a GC that is not known to have **metastasized**; and

(b) the above new method. where an increase in measured CC2 levels in the patient is associated with a cancer which has

metastasized;

(2) staging a GC in a patient having a GC, comprising steps (a)-(b) of method of (1), where an increase in CC2 levels in the patient is associated with a cancer which is progressing and a decrease is associated with a cancer which is regressing or in remission;

(3) monitoring a change in the stage of a GC in a patient, comprising step (a) of the method of (1) and:

(a) periodically measuring the level of CC2 in samples of cells, tissues or bodily fluids from the patient; and

(b) as for step (c) of the method of (1), wherein an increase in CC2 levels in the patient is associated with a cancer which has **metastasized**/is progressing and a decrease is associated with a cancer which is regressing or in remission;

(4) an antibody that specifically binds CC2;

(5) imaging a GC cancer in a patient, comprising administering the antibody of (4) (which is preferably labeled with paramagnetic ions or a radioisotope) to the patient; and

(6) a method of treating a GC in a patient, comprising administering the antibody of (5) (which is preferably conjugated to a cytotoxic agent) to the patient.

USE - The methods are used for diagnosing the presence of gastrointestinal **cancers** such as stomach **cancer**, **cancer** of the small intestine, and **colon cancer**, especially for a gastrointestinal **cancer** which has not **metastasized**. The methods may also be used for staging and monitoring gastrointestinal **cancer**. Antibodies which specifically bind to **colon specific gene 2** (CC2) can also be used in vivo in patients suspected of having gastrointestinal **cancers**, for treatment and imaging (all claimed).

ADVANTAGE - The new methods are sensitive and specific and allow for early diagnosis of gastrointestinal cancer. This means that treatment can commence earlier. Furthermore, the methods are not invasive, unlike prior art surgical procedures.
Dwg.0/0

L4 ANSWER 8 OF 24 WPIDS COPYRIGHT 2002 DERWENT INFORMATION LTD
 ACCESSION NUMBER: 2000-283453 [24] WPIDS
 DOC. NO. NON-CPI: N2000-213335
 DOC. NO. CPI: C2000-085572
 TITLE: Methods for diagnosing, staging, imaging and treating gynecologic and testicular cancers by measuring expression of a cancer specific gene.
 DERWENT CLASS: B04 D16 S03
 INVENTOR(S): ALI, S M; CAFFERKEY, R
 PATENT ASSIGNEE(S): (DIAD-N) DIADEXUS LLC
 COUNTRY COUNT: 22
 PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
WO 2000016805	A1	20000330	(200024)*	EN	33
RW: AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE					
W: CA JP US					
EP 1115426	A1	20010718	(200142)	EN	
R: AT BE CH CY DE DK ES FI FR GB GR IE IT LI LU MC NL PT SE					

09/867034

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 2000016805	A1	WO 1999-US21774	19990923
EP 1115426	A1	EP 1999-948349	19990923
		WO 1999-US21774	19990923

FILING DETAILS:

PATENT NO	KIND	PATENT NO
EP 1115426	A1 Based on	WO 200016805

PRIORITY APPLN. INFO: US 1998-101522P 19980923

AN 2000-283453 [24] WPIDS

AB WO 200016805 A UPAB: 20000522

NOVELTY - Methods ((I) - (IV)) for diagnosing, staging, imaging and treating gynecologic and testicular cancers by measuring expression of a cancer specific gene (CSG) (comprising a defined 1081 nucleotide sequence given in the specification), are new.

DETAILED DESCRIPTION - INDEPENDENT CLAIMS are included for the following:

(1) a method (I) for diagnosing the presence of a gynecological or testicular cancer in a patient, comprising:

(i) measuring the levels of CSG in cells, tissues or bodily fluids of the patient; and

(ii) comparing the measured levels of CSG with the levels found in a normal human control (a change in the measured level of CSG is associated with the presence of the cancer);

(2) a method (II) for diagnosing and monitoring **metastases** of a gynecological or testicular cancer, comprising:

(i) identifying a patient suffering from a cancer that is not known to have **metastasized**;

(ii) periodically measuring CSG levels in samples of cells, tissues or fluids from the patient; and

(iii) comparing the measured levels of CSG with the levels found in a normal human control (an increase in the measured level of CSG is associated with the presence of a cancer that has **metastasized**);

(3) a method (III) of staging a gynecological or testicular cancer, comprising:

(i) identifying a patient with the cancer;

(ii) periodically measuring levels of CSG in samples of cells tissues or fluids from the patient; and

(iii) comparing the measured levels of CSG with the levels found in a normal human control (an increase in the measured level of CSG is associated with the progression of the cancer and a decrease in the levels is associated with the remission of the cancer);

(4) an antibody (Ab) against CSG;

(5) a method (IV) of imaging a gynecological or testicular cancer comprising administering Ab; and

(6) a method (V) of treating a gynecological or testicular cancer comprising administering Ab.

USE - (I) - (IV) may used for be diagnosing, staging, imaging

09/867034

and treating gynecologic and testicular cancers.

ADVANTAGE - Early diagnosis of cancers improves the success rate of therapeutic protocols.

Dwg.0/0

L4 ANSWER 9 OF 24 WPIDS COPYRIGHT 2002 DERWENT INFORMATION LTD
ACCESSION NUMBER: 2000-256657 [22] WPIDS
DOC. NO. CPI: C2000-078328
TITLE: Diagnosing, staging, monitoring, imaging and
treating cancer especially gynecological cancers
e.g. breast, ovarian cancer and lung cancer,
involves measuring cancer specific gene levels in
cells and body fluids.
DERWENT CLASS: B04 D16
INVENTOR(S): CAFFERKEY, R; RECIPON, H; SALCEDA, S; SUN, Y
PATENT ASSIGNEE(S): (DIAD-N) DIADEXUS INC; (DIAD-N) DIADEXUS LLC
COUNTRY COUNT: 22
PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
WO 2000012758	A1	20000309	(200022)*	EN	58
RW: AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE					
W: CA JP US					
EP 1109937	A1	20010627	(200137)	EN	
R: AT BE CH CY DE DK ES FI FR GB GR IE IT LI LU MC NL PT SE					

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 2000012758	A1	WO 1999-US19655	19990901
EP 1109937	A1	EP 1999-946662	19990901
		WO 1999-US19655	19990901

FILING DETAILS:

PATENT NO	KIND	PATENT NO
EP 1109937	A1 Based on	WO 200012758

PRIORITY APPLN. INFO: US 1998-98880P 19980902

AN 2000-256657 [22] WPIDS

AB WO 200012758 A UPAB: 20000508

NOVELTY - Detecting, diagnosing **metastasis** and staging cancer by measuring levels of cancer specific genes (**CSG**) in cells, tissues or body fluids, is new. Their remission and progression, decreases and increases in **CSG** levels, is also monitored, by periodic sample analysis.

DETAILED DESCRIPTION - An INDEPENDENT CLAIM is also included for an antibody (I) against **CSG** which comprises a 2587, 576, 2070, 890, 1709, 406, 2479, 462 or 272 base pair sequence, all fully defined in the specification.

ACTIVITY - Cytostatic. No supporting data given.

MECHANISM OF ACTION - None given.

USE - The methods are useful for detecting, diagnosing, monitoring, staging, prognosing cancers, especially gynecologic cancers which include ovarian, breast, endometrial and uterine

09/867034

cancer (claimed) and lung cancer. (I) labeled with paramagnetic ions or a radioisotope is useful for imaging cancer and (I) conjugated with a cytotoxic agent is useful for treating cancer (claimed).

ADVANTAGE - The discrimination between **metastasized** and non-**metastasized** cancers, which was not possible using prior techniques, can be achieved using this method.
Dwg.0/0

L4 ANSWER 10 OF 24 WPIDS COPYRIGHT 2002 DERWENT INFORMATION LTD
ACCESSION NUMBER: 2000-205579 [18] WPIDS
DOC. NO. NON-CPI: N2000-152973
DOC. NO. CPI: C2000-063380
TITLE: Novel methods for diagnosing, monitoring, staging, imaging and treating **colon cancer** by measuring the level of **colon specific gene** markers.
DERWENT CLASS: B04 D16 S03
INVENTOR(S): MACINA, R A; RECIPON, H; SUN, Y
PATENT ASSIGNEE(S): (DIAD-N) DIADEXUS LLC
COUNTRY COUNT: 22
PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
WO 2000007632	A1	20000217	(200018)*	EN	42
RW: AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE					
W: CA JP US					
EP 1107798	A1	20010620	(200135)	EN	
R: AT BE CH CY DE DK ES FI FR GB GR IE IT LI LU MC NL PT SE					

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 2000007632	A1	WO 1999-US16357	19990720
EP 1107798	A1	EP 1999-937328	19990720
		WO 1999-US16357	19990720

FILING DETAILS:

PATENT NO	KIND	PATENT NO
EP 1107798	A1 Based on	WO 200007632

PRIORITY APPLN. INFO: US 1998-95231P 19980804

AN 2000-205579 [18] WPIDS

AB WO 200007632 A UPAB: 20000412

NOVELTY - A novel method for diagnosing the presence of **colon cancer** in a patient comprises measuring levels of **colon specific gene** markers (CSG) in cells, tissues or bodily fluids, and comparing the measured levels of CSG with levels of CSG from a normal human control, where an increase in measured CSG levels in the patient versus control is associated with the presence of **colon cancer**.

DETAILED DESCRIPTION - INDEPENDENT CLAIMS are also included for the following:

(1) a method of diagnosing **metastatic colon**

cancer in a patient, comprising:

(a) identifying a patient having **colon cancer** that is not known to have **metastasized**;

(b) measuring levels of **CSG** in cells, tissues or bodily fluids in the patient; and

(c) comparing the measured levels of **CSG** with levels of **CSG** from a normal human control, where an increase in measured **CSG** levels in the patient versus control is associated with a cancer which has **metastasized**;

(2) a method of staging **colon cancer** in a patient, comprising:

(a) identifying a patient with **colon cancer**

;

(b) measuring **CSG** levels in a cell, tissue or bodily fluid sample; and

(c) comparing levels to a normal human control sample, where an increase in **CSG** levels is associated with a cancer which is progressing, and a decrease in **CSG** levels is associated with a cancer which is regressing or in remission;

(3) a method of monitoring **colon cancer** in a patient for the onset of **metastasis**, comprising:

(a) identifying a patient having **colon cancer** that is not known to have **metastasized**;

(b) periodically measuring **CSG** levels in a cell, tissue or bodily fluid sample; and

(c) comparing the levels with a sample obtained from a normal human control where an increase in any one of the periodically measured levels is associated with a cancer that has **metastasized**;

(4) a method of monitoring changes in a stage of **colon cancer** in patient, comprising:

(a) identifying a patient having **colon cancer**

;

(b) periodically measuring **CSG** levels in a cell, tissue or bodily fluid sample; and

(c) comparing levels with a sample obtained from a normal human control, where an increase in any one of the periodically measured levels is associated with a cancer which is progressing in stage and a decrease in any one of the periodically measured levels is associated with a cancer which is regressing in stage or in remission;

(5) an antibody against a **CSG** which comprises the 1710, 1109 or 1141 base pair (bp) sequence, all fully defined in the specification;

(6) a method of imaging **colon cancer** in a patient, comprising administering to the patient the antibody of (5); and

(7) a method of treating **colon cancer** in a patient, comprising administering to the patient the antibody of (5).

ACTIVITY - Cytostatic.

MECHANISM OF ACTION - Antibodies to **colon specific genes** are administered alone or conjugated to cytotoxic agents.

USE - The method is used to detect, monitor, stage or give a prognosis for **colon cancer** (claimed). The antibodies are used for detection or image localization of the **colon specific genes (CSGs)**.

The antibodies can be conjugated to cytotoxic agent or drug and used to treat **colon cancer** (claimed).

ADVANTAGE - The methods of the invention are more accurate than prior art clinical methods for staging **colon cancer**, because they measure **colon** specific markers, and, unlike pathological staging methods, do not depend on an invasive procedure.

Dwg.0/0

L4 ANSWER 11 OF 24 EMBASE COPYRIGHT 2002 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 2000349854 EMBASE

TITLE: Flow cytometric analysis of apoptosis and proliferation in gastric cancer and precancerous lesion.

AUTHOR: Yu Qing Guo; Zhao Hua Zhu; Jin Fang Li

CORPORATE SOURCE: Dr. Y.Q. Guo, Department of Gastroenterology, Baoan District Hospital of Shenzhen, Shenzhen 518101, Guangdong Province, China

SOURCE: World Chinese Journal of Digestology, (2000) 8/9 (983-987).

Refs: 54

ISSN: 1009-3079 CODEN: SHXZF2

COUNTRY: China

DOCUMENT TYPE: Journal; Article

FILE SEGMENT: 016 Cancer
048 Gastroenterology

LANGUAGE: Chinese

SUMMARY LANGUAGE: English; Chinese

AB AIM: To investigate the changes and the possible role of the cell apoptosis index (AI), proliferation index (PI), the ratio of AI to PI and the DNA index (DI) in various gastric diseases. METHODS: The gastric mucosal biopsies taken by endoscopy from 15 cases of chronic superficial gastritis (CSG), 15 cases of chronic atrophic gastritis (CAG), 16 cases of gastritis epithelial dysplasia (Dys) and the specimens of gastric cancer (GC) tissue from surgically resected stomach in 50 patients with gastric cancer were collected in this study. All specimens were fixed in 10% formalin and embedded in paraffin. The apoptosis cells were labelled by TUNEL technic, the AI was expressed as the percentage of positive TUNEL staining cells. The total cell DNA was labelled by propidium index. The PI was expressed as the percentage of S + G2 M phases cells. The AI and PI ratio of AI to PI and the DI were measured by flow cytometry. RESULTS: The AI was significantly lower in GC (6.6%) than that in CAG (11.2%) and Dys (18.3%, $P < 0.05$), but not statistically lower than the AI in CSG (10.2%, $P > 0.05$). The PI in CSG, CAG, Dys and GC were 14.9%, 20.1%, 24.6% and 31.8% respectively. A statistical difference in PI was found between any two groups ($P < 0.05$). The ratio of AI to PI was the lowest in the GC (0.22) compared to CSG (0.65%), CAG (0.57) and Dys (0.72%, $P < 0.05$). The values of PI was significantly related to the depth of tumor invasion, lymph nodes or distant metastasis, tumor stages as well as the type of DNA ploid ($P < 0.05$). All of CSG and CAG were diploid, however, the aneuploid was found in 25% cases of Dys (4/16) and 82% cases of GC (41/50). The gastric cancers with aneuploid had a significantly higher PI (33.6%) and lower ratio of AI to PI (0.19%) when compared with that in diploid tumor (PI = 23.4%, AI/PI = 0.35), $P < 0.05$. There was a positive correlation between the AI and PI in both CSG and CAG ($r = 0.52$ and r

09/867034

= 0.55, repectively), $P < 0.05$, but such correlation was not seen in the Dys and GC. CONCLUSION: The breakdown of the balance between the cell proliferation and apoptosis gradually developed from **CSG** to GC. The character of cell kinetics in gastric cancer was the superiority of proliferation to apoptosis due to the increase in proliferation and the decrease in apoptosis. The aneuploid DNA was detected earliest in Dys and became preponderant in GC. The gastric cancer with aneuploid DNA had significantly higher PI and lower ratio of AI to PI. These results suggested that the detection of aneuploid may be useful for a early diagnosis of precancerous lesion as well as gastric cancer, and for evaluating the malignant degree of tumor.

L4 ANSWER 12 OF 24 WPIDS COPYRIGHT 2002 DERWENT INFORMATION LTD
ACCESSION NUMBER: 2000-126383 [11] WPIDS
DOC. NO. NON-CPI: N2000-095292
DOC. NO. CPI: C2000-038417
TITLE: Diagnosing, monitoring and staging **colon cancer**.
DERWENT CLASS: B04 D16 J04 S03
INVENTOR(S): MACINA, R A; SUN, Y; YANG, F
PATENT ASSIGNEE(S): (DIAD-N) DIADEXUS LLC
COUNTRY COUNT: 22
PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
WO 9960161	A1	19991125	(200011)*	EN	29
RW: AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE					
W: CA JP US					
EP 1080227	A1	20010307	(200114)	EN	
R: AT BE CH CY DE DK ES FI FR GB GR IE IT LI LU MC NL PT SE					

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 9960161	A1	WO 1999-US10498	19990512
EP 1080227	A1	EP 1999-924210	19990512
		WO 1999-US10498	19990512

FILING DETAILS:

PATENT NO	KIND	PATENT NO
EP 1080227	A1 Based on	WO 9960161

PRIORITY APPLN. INFO: US 1998-86266 19980521

AN 2000-126383 [11] WPIDS

AB WO 9960161 A UPAB: 20000301

NOVELTY - Diagnosing the presence, or **metastasis**, of **colon cancer** in a patient, comprising measuring **Colon Specific Gene (CSG)**

levels in a cell, tissue or bodily fluid sample of the patient and a control, where increased **CSG** levels in the patient compared to the control is associated with the presence, or **metastasis**, of **colon cancer**, is new.

DETAILED DESCRIPTION - INDEPENDENT CLAIMS are also included for

the following:

(1) staging **colon cancer** in a patient, comprising identifying a patient with **colon cancer**, measuring **CSG** levels in a cell, tissue or bodily fluid sample and comparing levels to a control sample, where increasing **CSG** levels is associated with a **cancer** which is progressing, and decreased levels are associated with a **cancer** which is regressing or in remission;

(2) monitoring **colon cancer** in a patient for the onset of **metastasis**, comprising identifying a patient having **colon cancer** that is not known to have **metastasized**, periodically measuring **CSG** levels in a cell, tissue or bodily fluid sample, and comparing the levels with a sample obtained from a control where an increase in any one of the periodically measured levels is associated with a **cancer** that has **metastasized**; and

(3) monitoring changes in a stage of **colon cancer** in patient, comprising identifying a patient having **colon cancer**, periodically measuring **CSG** levels in a cell, tissue or bodily fluid sample, and comparing levels with a sample obtained from a control, where an increase in any one of the periodically measured levels is associated with a **cancer** which is in progressing stage and a decrease in any one of the periodically measured levels is associated with a **cancer** which is regressing in stage or in remission.

USE - The novel method is used to detect, monitor, stage and give a prognosis for **colon cancer**.

ADVANTAGE - The invention is more accurate than prior art clinical methods for staging **colon cancer**, and unlike pathological staging methods, does not depend on an invasive procedure.

Dwg.0/0

L4 ANSWER 13 OF 24 WPIDS COPYRIGHT 2002 DERWENT INFORMATION LTD
 ACCESSION NUMBER: 1999-130432 [11] WPIDS
 CROSS REFERENCE: 2000-464055 [38]
 DOC. NO. CPI: C1999-038062
 TITLE: Isolated human **colon specific gene** - used to develop products for the diagnosis and treatment of disorders of the **colon**, e.g. **colon cancer** and **metastases**.
 DERWENT CLASS: B04 D16
 INVENTOR(S): DILLON, P J; LI, Y; SOPPET, D R
 PATENT ASSIGNEE(S): (HUMA-N) HUMAN GENOME SCI INC
 COUNTRY COUNT: 1
 PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
US 5861494	A	19990119	(199911)*		20

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
US 5861494	A	US 1995-468413	19950606

09/867034

PRIORITY APPLN. INFO: US 1995-468413 19950606

AN 1999-130432 [11] WPIDS

CR 2000-464055 [38]

AB US 5861494 A UPAB: 20000823

(A) An isolated polynucleotide (PN) which comprises a member selected from:

(a) a PN sequence encoding a polypeptide comprising amino acids 2 to 158 of a 158 amino acid sequence (II) as given in the specification, and

(b) the full complement of (a).

Also claimed are:

(1) a recombinant vector comprising a PN as in (A), where the PN is DNA;

(2) a recombinant host cell comprising a PN as in (A), where the PN is DNA;

(3) an isolated PN comprising a member selected from:

(a) a PN sequence encoding the same mature polypeptide encoded by a human cDNA in ATCC No. 97129, and

(b) the full complement of (a);

(4) an isolated PN comprising a PN sequence that will hybridise under stringent conditions to a member selected from (a) and (b) as in (A);

(5) an isolated PN comprising a PN sequence that will hybridise under stringent conditions with a member selected from (a) and (b) as in (4);

(6) a method of making a recombinant vector comprising inserting an isolated PN as in (3), (4) or (5) into a recombinant vector, where the PN is DNA, and

(7) a recombinant host cell comprising a PN as in (3), (4) or (5), where the PN is DNA.

USE - The PNs, which represent a human **colon specific gene** can be used to develop products for the diagnosis of a disorder of the **colon**, e.g. **colon cancer** or **metastases**. The products can also be used to screen for agonists or antagonists for the polypeptides.

The antagonists may be used to treat **colon cancer**, since they interact with the function of **colon specific polypeptides** in a manner to inhibit natural function which is necessary for the viability of **colon cancer** cells. The products can also be used for the production of antibodies and for the identification of receptors for the polypeptides.

Dwg.0/1

L4 ANSWER 14 OF 24 MEDLINE DUPLICATE 1

ACCESSION NUMBER: 1999243161 MEDLINE

DOCUMENT NUMBER: 99243161 PubMed ID: 10226574

TITLE: Extract of Solanum muricatum (Pepino/CSG) inhibits tumor growth by inducing apoptosis.

AUTHOR: Ren W; Tang D G

CORPORATE SOURCE: Virotech Canada Inc., Windsor, ON, Canada.. wpren@mnsi.net

SOURCE: ANTICANCER RESEARCH, (1999 Jan-Feb) 19 (1A) 403-8.

Journal code: 59L; 8102988. ISSN: 0250-7005.

PUB. COUNTRY: Greece

Journal; Article; (JOURNAL ARTICLE)

Searcher : Shears 308-4994

09/867034

LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199905
ENTRY DATE: Entered STN: 19990601
Last Updated on STN: 19990601
Entered Medline: 19990520

AB BACKGROUND: Apoptosis, or programmed cell death, is characterized by certain distinct morphological and biochemical features. Most chemotherapeutic drugs exert their anti-**tumor** effects by inducing apoptosis. Therefore, an effective compound inducing apoptosis appears to be a relevant strategy to suppress various human **tumors**. In a search for **tumor** inhibitors from various kinds of plants, we found that extracts from *Solanum muricatum* (CSG) can inhibit **tumor** growth both in vivo and in vitro by inducing apoptosis. MATERIALS AND METHODS: A lyophilized aqueous fraction extracted from *Solanum muricatum* (CSG4) was used in this study. The human cell lines tested include: prostate (PC3, DU145), stomach (MKN45), liver (QGY-7721, SK-HEP-1), breast (MDA-MB-435), ovarian (OVCAR), **colon** (HT29) and lung (NCI-H209) **cancer** cells; NHP (prostate), HUVEC (umbilical vein endothelial cell), and WI-38 (lung diploid fibroblasts) normal cells. The cell survival was determined by either Cell Titer MTS cell proliferation kit or trypan blue dye exclusion assay. The apoptosis was analyzed by (a) apoptotic morphology by light microscopy; (b) DNA ladder formation; (c) PARP cleavage assay. RESULTS: a) CSG possesses selective cytotoxic activity against all the **tumor** cell lines being tested. The LD50 value is 561-825 micrograms/ml. b) CSG showed a much lower cytotoxicity to NHP, HUVEC and WI-38 normal cell lines with LD50 value being 2.8-3.2 mg/ml, which is 3-6 fold higher than on **tumor** cells. c) The in vivo study demonstrated that injection of CSG (100 micrograms) directly into **tumor** mass can reduce the **tumor** volume dramatically in nude mice inoculated with MKN45 gastric **cancer** cells. d) CSG-mediated **tumor** growth inhibition is through induction of apoptotic cell death, as manifested by (a) typical apoptotic morphology; (b) DNA ladder formation; and (c) PARP cleavage assay. CONCLUSION: Taken together, the present study suggests, for the first time, that CSG may represent promising new chemical entity which preferentially targets various **tumor** cells by triggering apoptosis.

L4 ANSWER 15 OF 24 WPIDS COPYRIGHT 2002 DERWENT INFORMATION LTD
ACCESSION NUMBER: 1998-229823 [20] WPIDS
DOC. NO. CPI: C1998-071736
TITLE: **Colon-specific nucleic acids - useful as probes for detecting colon cancer micrometastases.**
DERWENT CLASS: B04 D16
INVENTOR(S): ROSEN, C; YU, G
PATENT ASSIGNEE(S): (HUMA-N) HUMAN GENOME SCI INC
COUNTRY COUNT: 1
PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
US 5733748	A	19980331	(199820)*		50

09/867034

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
US 5733748	A	US 1995-469667	19950606

PRIORITY APPLN. INFO: US 1995-469667 19950606

AN 1998-229823 [20] WPIDS

AB US 5733748 A UPAB: 19980520

A new isolated polynucleotide (I) comprises a sequence at least 95% identical to a sequences encoding polypeptides that are either: (a) a 167 amino acid (aa) sequence; (b) aa 2-135 of a 135 aa sequence; (c) a 228 aa sequence; (d) a 163 aa sequence; (e) an 81 aa sequence; (f) aa 2-323 of a 323 aa sequence; (g) a 156 aa sequence; or (h) the complements of sequences as in (a)-(g).

Also claimed are: (1) a recombinant vector comprising (I); (2) a recombinant host cell containing (1); and (3) an isolated polynucleotide comprising a sequence at least 95% identical to a sequence encoding a mature polypeptide encoded by the human cDNA in ATCC 97102 or its complement.

USE - The polynucleotides are partial or full-length cDNA clones of **colon-specific genes** and can be used as probes to detect expression of the corresponding human genes, e.g. in diagnostic assays for detecting micrometastases of **colon cancer**. The recombinant cells can be used to produce the polypeptides, in order that antibodies can be raised and used in further screening or diagnostics.

Dwg.0/13

L4 ANSWER 16 OF 24 WPIDS COPYRIGHT 2002 DERWENT INFORMATION LTD

ACCESSION NUMBER: 1997-043162 [04] WPIDS

DOC. NO. NON-CPI: N1997-035728

DOC. NO. CPI: C1997-013821

TITLE: New isolated **colon specific gene** - used to develop prods. for use in the diagnosis and treatment of **colon disorders**, partic. **colon cancer**

DERWENT CLASS: B04 D16 S03

INVENTOR(S): DILLON, P J; LI, Y; SOPPET, D R

PATENT ASSIGNEE(S): (HUMA-N) HUMAN GENOME SCI INC

COUNTRY COUNT: 60

PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
WO 9639541	A1	19961212	(199704)*	EN	64
RW: AT BE CH DE DK ES FR GB GR IE IT KE LU MC MW NL OA PT SD SE SZ UG					
W: AM AT AU BB BG BR BY CA CH CN CZ DE DK ES FI GB GE HU JP KE KG KP KR KZ LK LT LU LV MD MG MN MW MX NO NZ PL PT RO RU SD SE SI SK TJ TT UA US UZ VN					
AU 9528180	A	19961224	(199715)		
EP 833948	A1	19980408	(199818)	EN	
R: AT BE CH DE DK ES FR GB GR IE IT LI LU MC NL PT SE					
CN 1194009	A	19980923	(199906)		
JP 11506920	W	19990622	(199935)		57

Searcher : Shears 308-4994

09/867034

AU 711346 B 19991014 (200001)
KR 99022532 A 19990325 (200023)

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 9639541	A1	WO 1995-US7169	19950606
AU 9528180	A	AU 1995-28180	19950606
		WO 1995-US7169	19950606
EP 833948	A1	EP 1995-923729	19950606
		WO 1995-US7169	19950606
CN 1194009	A	CN 1995-197931	19950606
		WO 1995-US7169	19950606
JP 11506920	W	WO 1995-US7169	19950606
		JP 1997-500365	19950606
AU 711346	B	AU 1995-28180	19950606
		WO 1995-US7169	19950606
KR 99022532	A	WO 1995-US7169	19950606
		KR 1997-709013	19971206

FILING DETAILS:

PATENT NO	KIND	PATENT NO
AU 9528180	A Based on	WO 9639541
EP 833948	A1 Based on	WO 9639541
JP 11506920	W Based on	WO 9639541
AU 711346	B Previous Publ. Based on	AU 9528180 WO 9639541
KR 99022532	A Based on	WO 9639541

PRIORITY APPLN. INFO: WO 1995-US7169 19950606

AN 1997-043162 [04] WPIDS

AB WO 9639541 A UPAB: 19970122

An isolated polynucleotide (PN) comprises a member selected from:
(a) a PN encoding the polypeptide comprising amino acids 1-158 of a
158 amino acid sequence given in the specification; (b) a PN which
encodes a mature polypeptide encoded by the DNA contained in ATCC
Deposit No. 97129; (c) a PN capable of hybridising to and which is
at least 70% identical to a PN of (a) or (b); and (d) a PN fragment
of a PN of (a), (b) or (c).

USE - The PNs can be used for the diagnosis of disorders of the
colon in hosts. The polypeptide and its (ant)agonists can be
used for the treatment of disorders of the **colon**, partic.
colon cancer.

Dwg.0/1

L4 ANSWER 17 OF 24 WPIDS COPYRIGHT 2002 DERWENT INFORMATION LTD

ACCESSION NUMBER: 1997-043054 [04] WPIDS

DOC. NO. CPI: C1997-013713

TITLE: Human **colon specific**
genes and their expression products -
detection of which, in non-**colon** tissue
samples, can be used as indication of **colon**
cancer metastasis.

DERWENT CLASS:

B04 D16

INVENTOR(S):

ROSEN, C A; YU, G

Searcher : Shears 308-4994

09/867034

PATENT ASSIGNEE(S): (HUMA-N) HUMAN GENOME SCI INC
COUNTRY COUNT: 60
PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
WO 9639419	A1	19961212	(199704)*	EN	88
RW: AT BE CH DE DK ES FR GB GR IE IT KE LU MC MW NL OA PT SD SE SZ UG					
W: AM AT AU BB BG BR BY CA CH CN CZ DE DK ES FI GB GE HU JP KE KG KP KR KZ LK LT LU LV MD MG MN MW MX NO NZ PL PT RO RU SD SE SI SK TJ TT UA US UZ VN					
AU 9528205	A	19961224	(199715)		
EP 847398	A1	19980617	(199828)	EN	
R: AT BE CH DE DK ES FR GB GR IE IT LI LU MC NL PT SE					
JP 11506342	W	19990608	(199933)		71

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 9639419	A1	WO 1995-US7289	19950606
AU 9528205	A	AU 1995-28205	19950606
		WO 1995-US7289	19950606
EP 847398	A1	EP 1995-923764	19950606
		WO 1995-US7289	19950606
JP 11506342	W	WO 1995-US7289	19950606
		JP 1997-500380	19950606

FILING DETAILS:

PATENT NO	KIND	PATENT NO
AU 9528205	A Based on	WO 9639419
EP 847398	A1 Based on	WO 9639419
JP 11506342	W Based on	WO 9639419

PRIORITY APPLN. INFO: WO 1995-US7289 19950606

AN 1997-043054 [04] WPIDS

AB WO 9639419 A UPAB: 19970122

A novel isolated polynucleotide (I), is selected from; (a) a polynucleotide encoding the same polypeptide as a polynucleotide having a 1129 bp nucleic acid sequence given in the specification, or an at least 70% identical hybrid; or (b) a polynucleotide encoding the same mature polypeptides as a human gene having a coding portion, which includes DNA having at least 90% identity to the DNA one of nine nucleic acid sequences given in the specification, which represent fragments of **colon specific genes**, or a DNA included in ATCC 97102.

USE - The novel isolated polynucleotide, comprises 1 of 13 human **colon specific genes**, designated CSG1-CSG13, which are primarily expressed in **colon** derived tissues. Transcription of these human genes in a non-**colon** tissue sample can be used as an indication of a **colon** disorder (i.e. **colon cancer metastases**); specifically the detection of an altered level of RNA transcribed from one of the human genes, DNA complementary to the RNA or an expression prod. (e.g. detected in an immunoassay using the

antibody) (claimed). The polypeptide and cpd. (which may be a polypeptide expressed in vivo via the admin. of a polynucleotide encoding the cpd.) can be used for the treatment of a patient in need of CSG protein or CSG protein inhibition, respectively (claimed), e.g. a **colon cancer** patient.
Dwg.0/13

L4 ANSWER 18 OF 24 CANCERLIT

ACCESSION NUMBER: 96647047 CANCERLIT

DOCUMENT NUMBER: 96647047

TITLE: Phase II first line chemotherapy (CT) study with docetaxel (taxotere) and prophylactic premedication of fluid retention (FR) in patients (pts) with **metastatic** (MTS) or locally advanced breast cancer (ABC): EORTC Clinical Screening Group (CSG) (Meeting abstract).

AUTHOR: Fumoleau P; Krakowski I; Chevallier B; Roche H; Kerbrat P; Dieras V; Azli N; Rios M; Riva A; Lentz M A; van Glabbeke M

CORPORATE SOURCE: Centre R. Gauducheau, Nantes, France.

SOURCE: Non-serial, (1995). EORTC Early Drug Development Meeting 1995, June 21-24, 1995, Corfu, Greece.

DOCUMENT TYPE: (MEETING ABSTRACTS)
(CLINICAL TRIAL, PHASE II)
(CLINICAL TRIAL)

FILE SEGMENT: ICDB

LANGUAGE: English

ENTRY MONTH: 199607

AB **CSG** has already reported on the activity and the toxicity of Docetaxel as first line CT in pts with mts or locally ABC (ASCO A115, 1994). This multi-center study was performed in order to confirm efficacy and to evaluate efficacy of prophylactic premedication including dexchlorpheniramine iv 5 mg and ranitidine iv 50 mg 30 mn before CT plus prednisolone po 130 mg 12 and 6 hr before CT in order to reduce the incidence and severity of FR observed in previous studies. From 08/93 to 05/94 37 pts were included and all were evaluable for response and safety. Pts: median age = 48(29-65); Ps who at baseline was PS = 0 (48.6%), PS = 1(43.2%), PS = 2(8.1%); Nb of **metastatic** sites was 1(21.6%), 2(29.7%), greater than 2(48.6%); Mts sites: liver (40.5%), lung (37.8%), bone (51.4%), lymph nodes (48.6%), skin (18.9%), breast (18.9%); 24 pts received prior neoadjuvant and/or adjuvant CT with anthracyclines in 87.5%; Median time between last CT and Docetaxel was 32.1 (2.8-143 months). All responses were reviewed by the same independent board. Treatment: total number of cycles= 200; median number of cycles = 5 (1-10); median cumulative dose= 499 (97.6-994 mg/m2); median dose intensity = 32.7 (19.6-33.8 mg/m2/w). Results (NCI-CTC criteria): 2 CR, 23 PR, 8 NC, 4 PD, giving a RR of 67.6% (95% CI:50.2-82%). Median duration of responses not reached (9+-36+w); median time to response= 7+ (1+-22+w); median time to progression on 31/05/94 = 31+(1-36+w). Response by site was skin 100%, lymph nodes 78.6%, liver 76.9%, breast 66.7%, lung 0%. RR was not affected by prior or no CT nor nb of organs involved (1 vs 2 vs greater than 2). Safety: overall grade 4 neutropenia occurred in 89% with median duration of 6 days (2-14) and febrile neutropenia in 35.1%. Other grade 3-4 NCI toxicities included alopecia (100%), stomatitis (5.4%) and skin (2.7%). HSR toxicity and neurotoxicity

09/867034

were only grade 1-2 and occurred, respectively, in 16.2 and 81.1% of pts. Nails disorders occurred in 64.9% and was moderate in 13.5%; asthenia in 73% and was moderate in 21.6%. FR was a reason for study discontinuation in 43.2%. Median cumulative dose to onset of FR was 301 mg/m² (98-595) and to treatment discontinuation due to retention was 698 mg/m² (98-995+). This syndrome was slowly reversible. Conclusions: this study confirms the overall activity of Docetaxel particularly in liver mts pts. The main acute toxicities observed are easy to handle. The premedication proposed failed to reduce the incidence and/or to delay the onset of fluid retention.

L4 ANSWER 19 OF 24 CANCERLIT

ACCESSION NUMBER: 95613243 CANCERLIT

DOCUMENT NUMBER: 95613243

TITLE: Phase II first line chemotherapy (CT) study with docetaxel (Taxotere) and prophylactic premedication of fluid retention (FR) in patients (pts) with **metastatic** (mts) or locally advanced breast cancer (ABC). EORTC clinical screening group (CSG) (Meeting abstract).

AUTHOR: Krakowski I; Rios M; Fumoleau P; Chevallier B; Roche H; Kerbrat P; Deras V; Azli N; Bougon N; Riva A; et al

CORPORATE SOURCE: Centre A. Vautrin, CRLCC, 54511 Vandoeuvre les Nancy, France.

SOURCE: Proc Annu Meet Am Soc Clin Oncol, (1995). Vol. 14, pp. A87.
ISSN: 0732-183X.

DOCUMENT TYPE: (MEETING ABSTRACTS)
(CLINICAL TRIAL)
(MULTICENTER STUDY)
(CLINICAL TRIAL, PHASE II)

FILE SEGMENT: ICDB

LANGUAGE: English

ENTRY MONTH: 199511

AB CSG has already reported on the activity and the toxicity of docetaxel as first line CT in pts with mts or locally ABC (ASCO 94 A115). This multicenter study was performed in order to confirm efficacy and to evaluate efficacy of prophylactic premedication including dexchlorpheniramine iv 5 mg and ranitidine iv 50 mg 30 min before CT plus prednisolone po 130 mg 12 and 6 hr before CT in order to reduce the incidence and severity of FR observed in previous studies. From 08/93 to 05/94, 37 pts were included and all were evaluable for response and safety. Pts: median age=48 (29-65), PS WHO at baseline was PS=0 (48.6%), PS=1 (43.2%), PS=2 (8.1%); **metastatic** sites: 1 (21.6%), 2 (29.7%), greater than 2 (48.6%) (visceral involvement in 75.7%); mts locale: liver (40.5%), lung (37.8%), bone (51.4%), lymph nodes (48.6%), skin (18.9%), breast (18.9%); 24 pts (64.9%) received prior neoadjuvant and/or adjuvant CT with anthracycline in 87.5%; median time between last CT and docetaxel was 32.1 (12.8-143.0) months. All responses were reviewed by the same independent board. Treatment: total number of cycles=200, median 5 (1-10); median cumulative dose=499 (97.6-994.5 mg/m²); median dose intensity=32.7 (19.6-33.8 mg/m²/w). Results (NCI-CTC criteria): 2 CR, 23 PR, 8 NC, 4 PD, RR was 67.6% (95% CI: 50.2-82%); median duration of response not reached (9+ to 36+ w); median time to response=7+ (1+ to 22+ w); median time to progression on 31/05/94=31+ (1-36+ w). Response by site: skin 100%, lymph nodes

78.6%, liver 76.9%, breast 66.7%, lung 0%. RR is not affected by prior or no CT nor number of organs involved (1 vs 2 vs greater than 2). Safety: overall grade 4 neutropenia occurred in 89.0% with median duration of 6 days (2-14) and febrile neutropenia in 35.1%. Other grade 3-4 NCI toxicities included alopecia (100%), stomatitis (5.4%) and skin (2.7%). HSR toxicity and neurotoxicity were only Grade 1-2 and occurred, respectively, in 16.2% and 81.1% of pts. Nails disorder occurred in 64.9% and was moderated in 13.5%; asthenia in 73% and was moderated in 21.6%. FR occurred in 89.2% and was moderated in 32.4% or severe in 10.8%. FR was a reason for study discontinuation in 43.2%. Median cumulative dose to onset of FR was 301 mg/m2 (98+ to 595) and to treatment discontinuation due to retention was 698 mg/m2 (98+ to 995). This syndrome was slowly reversible. Conclusions: This study confirmed the overall activity of docetaxel particularly with liver mts. The main acute toxicities observed were easy to handle. The premedication proposed failed to reduce the incidence and/or to delay the onset of fluid retention.
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L4 ANSWER 20 OF 24 BIOSIS COPYRIGHT 2002 BIOSIS

ACCESSION NUMBER: 1995:15068 BIOSIS

DOCUMENT NUMBER: PREV199598029368

TITLE: Activity of Taxotere (Docetaxel) in liver
metastasis (Mts) of advanced breast cancer
(ABC): Analysis on 17 patients (pts), experience of
the EORTC Clinical Screening Cooperative Group (CSG).

AUTHOR(S): Chevallier, B. (1); Kerbrat, P.; Dieras, V.;
Maugard-Louboutin, C.; Roche, H.; Misset, J. L.;
Lentz, M. A.; Azli, N.; Klink-Alakl, M.; Fumoleau, P.
(1)

CORPORATE SOURCE: (1) Centre Henri Becquerel, Rouen France
SOURCE: Breast Cancer Research and Treatment, (1994) Vol. 32,
No. SUPPL., pp. 34.
Meeting Info.: 17th Annual San Antonio Breast Cancer
Symposium on Breast Cancer Research and Treatment San
Antonio, Texas, USA December 6-10, 1994
ISSN: 0167-6806.

DOCUMENT TYPE: Conference

LANGUAGE: English

L4 ANSWER 21 OF 24 CANCERLIT

ACCESSION NUMBER: 92678222 CANCERLIT

DOCUMENT NUMBER: 92678222

TITLE: EOI OSTEOSARCOMA TRIALS (MEETING ABSTRACT).

AUTHOR: Burgers J M; van Glabbeke M; Souhami R; Bramwell V

CORPORATE SOURCE: No affiliation given.

SOURCE: Med Pediatr Oncol, (1990). Vol. 18, No. 5, pp. 223.

DOCUMENT TYPE: (CLINICAL TRIAL)
(MULTICENTER STUDY)

FILE SEGMENT: ICDB

LANGUAGE: English

ENTRY MONTH: 199201

AB The European Osteosarcoma Intergroup (EOI) was composed from the
SIOP, the EORTC, the MRC and the UKCCSG; now the CSG from
Canada is also participating. The main current study 80861 concerns
nonmetastatic operable osteosarcoma of the limb. Two chemotherapy
schedules are compared with local treatment (loc tr) at week 9. In

09/867034

arm 1, 6 courses of cisplatin (CP) 100 mg/m², and Adriamycin (A) 25 mg/m² on days 1, 2, 3 are given at 3 weekly intervals with a greater interval at time of surgery. The 2nd arm consists of a modified T10 protocol including high-dose methotrexate (Mt) with a total duration of 42 wk. In several countries Mt is specially available for such study purposes. At March 1, 1990, 231 patients (pts) were registered, 3 quarters coming from the UK. More participation from the continental SIOP members is welcomed. The goal is to reach a total of 400 pts. The previous protocol 80831 collected 207 pts in the neoadjuvant and adjuvant setting from limb osteosarcoma. The same arm 1 as above was compared to 4 courses of CP and A, preceded at 10 days by 8 mg/m² Mt with leukovorin rescue. At 3 yr disease-free survival (DFS) is 65% and 41% for the 2 and 3 drug arm, respectively, with equal survival 65%. For planned conservative surgery (cons S) DFS = 56% and for amputation 41% with equal survival. The difference in DFS between the 2 drug arms could be demonstrated for cons S. Local recurrence occurred in 9% of pts. Histologic grading is being performed. Current pilot studies: (a) A, CP and ifosfamide (PIA) in **metastatic** or inoperable cases and loc tr if possible at week 9, study coordinator Dr Voute; (b) A, CP with loc tr at week 9 for nonosteosarcoma spindle cell tumors or bone, study coordinator Dr V Bramwell.

L4 ANSWER 22 OF 24 CANCERLIT

ACCESSION NUMBER: 82610591 CANCERLIT

DOCUMENT NUMBER: 82610591

TITLE: [TWO CASES OF SEBACEOUS CARCINOMA OBSERVED AT THE S. SPIRITO HOSPITAL OF CASALE MONTEFERRATO IN 1980].
SU DUE CASI DI CARCINOMA SEBACEO OSSERVATI PRESSO L'OSPEDALE 'S. SPIRITO' DI CASALE MONTEFERRATO NELL'ANNO 1980.

AUTHOR: Deregibus P; Battezzati G

CORPORATE SOURCE: Divisione di Chirurgia Generale, Ospedale 'S. Spirito', Casale Monferrato (Alessandria), Italy.

SOURCE: Minerva Med, (1982). Vol. 73, No. 5, pp. 213-217.
ISSN: 0026-4806.

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

FILE SEGMENT: ICDB

LANGUAGE: Italian

ENTRY MONTH: 198205

AB Two patients (1 man, 1 woman; 56 and 78 yr old, respectively) with carcinomas of the sebaceous gland (**CSG**) were reported. In the woman, a cyst had been removed 20 yr earlier at the right side of the face under the hair; this cyst was close to a tumor that started growing 10 yr later, that reached the size of a small mandarine, and that was without local or distant **metastases**. The man had a perianal tumor that was removed a few months prior to the appearance of a carcinoma of the surrounding skin; **metastases** were observed in the groin, rib, shoulder, and skull (behind the left eye), but not in the spine. This patient died 2 mo later. (6 Refs)

L4 ANSWER 23 OF 24 CANCERLIT

ACCESSION NUMBER: 82610588 CANCERLIT

DOCUMENT NUMBER: 82610588

TITLE: [COMPARATIVE EVALUATION OF CHOLECYSTOGRAPHY, CHOLANGIOGRAPHY, ECHOTOMOGRAPHY, AND CHOLESCINTIGRAPHY IN SURGICAL BILE DUCT DISORDERS].

VALUTAZIONE COMPARATIVA FRA COLECISTOGRAFIA,
COLANGIOGRAFIA, ECOTOMOGRAFIA E COLESCINTIGRAFIA
NELLE AFFEZIONI CHIRURGICHE DELLE VIE BILIARI.

AUTHOR: Sgro M; Mure G; Campanoni V; Clerici R
CORPORATE SOURCE: I Divisione Chirurgia Generale, Ospedale Generale
Provinciale di Gallarate, Gallarate, Italy.
SOURCE: Minerva Med, (1982). Vol. 73, No. 3/4, pp. 109-114.
ISSN: 0026-4806.
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
FILE SEGMENT: ICDB
LANGUAGE: Italian
ENTRY MONTH: 198205

AB Cholecystography (CCG), cholangiography (CAG), echotomography (ETG), and cholescintigraphy (CSG) were comparatively evaluated in 70 patients (27 men, 43 women; 22-76 yr old) with bile duct disease. Of the 70 patients, 30 had cholelithiasis and surgery, 20 biliary cyst, and 20 jaundice (JA). Results of of the patients with cholelithiasis or biliary cysts showed that the ETG diagnosed correctly 27/30 patients with cholelithiasis and 19/20 patients with biliary cyst. Among the patients with the JA, 6 had pancreatic cancer (PA), 4 had cancer of the hepatic biliary duct (CHBD), and 1 had hilar **metastases**. Patients with JA and bilirubin greater than 4 mg% should be examined with the aid of the ETG and the **CSG**, since the CAG cannot be used. The ETG diagnosed correctly 4/6 patients with PA and 2/4 patients with CHBD; the **CSG** diagnosed correctly the 2/6 patients with the PA. Protocols developed and used in diagnosis of the patients with or without JA were presented. (69 Refs)

L4 ANSWER 24 OF 24 CANCERLIT

ACCESSION NUMBER: 79600632 CANCERLIT
DOCUMENT NUMBER: 79600632
TITLE: CARCINOEMBRYONIC ANTIGEN (CEA) AS A MONITOR OF
CRYOSURGICAL TREATMENT OF PATIENTS WITH RECTAL
CARCINOMA.
AUTHOR: Lamerz R; Feifel G; Kohl H J; Lutz H
CORPORATE SOURCE: Medizinischen Klinik II, Klinikum Grosshadern der
Universitat Munchen, Marchioninistrasse 15, 8000
Munchen 70, W. Germany.
SOURCE: Fortschr Med, (1978). Vol. 96, No. 41 2071-2072, pp.
2074-2075.
ISSN: 0015-8178.
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
FILE SEGMENT: ICDB
LANGUAGE: German
ENTRY MONTH: 197901

AB The serum levels of CEA were studied in 39 patients (31 men, 8 women; 40-84 yr) with histologically proven rectal carcinoma. All these patients were treated with cryosurgery (**CSG**) using liquid nitrogen at -110 to -160 C. Cryosurgery was used because the tumor was within 15 cm of the rectum, inoperable, or the patient refused other surgery. An I125 radioimmunoassay was used for CEA; 3 nanog/ml was established as the upper level of normal by studies on healthy persons. Of the 23 patients whose tumors were reduced by **CSG** (group 1), 7 showed a clear decrease in CEA levels after **CSG**, 10 showed no change, 5 had markedly increasing levels (12-1,853 nanog/ml), and 2 had variable levels between 3-6 nanog/ml. All five patients with marked increases were found to have distant

09/867034

metastases in the lungs or liver. Of the 11 patients whose tumors progressed after **CSG** (group 2), 9 showed an increase in CEA (3 had normal CEA levels before surgery) and 2 had CEA levels that remained close to normal (5 nanog/ml or less). Five patients had tumors unchanged by **CSG**: CEA levels remained in the normal range in two, CEA levels remained elevated without change in two patients, and a small increase in CEA was seen in one terminal patient. In group 1 patients in whom **metastases** were not found, only 2/18 had an increasing or elevated CEA level after treatment, compared with 9/11 in group 2 (p less than 0.001). In five patients with distant **metastases**, CEA increases or constantly elevated values were found; this response was found in only 2/18 without **metastases** (p less than 0.005). Serum CEA levels, determined before and after **CSG**, seem to be useful indicators of tumor progression and/or distant **metastases**. (21 Refs)

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